

(FILE 'HOME' ENTERED AT 09:23:05 ON 03 NOV 2006)

FILE 'REGISTRY' ENTERED AT 09:23:21 ON 03 NOV 2006

EXP BETA-GLUCAN/CN  
EXP GLUCAN  
EXP GLUCAN/CN  
EXP BETA GLUCAN/CN

INDEX 'ADISCTI, ADISINSIGHT, ADISNEWS, AGRICOLA, ANABSTR, ANTE, AQUALINE, AQUASCI, BIOENG, BIOSIS, BIOTECHABS, BIOTECHDS, BIOTECHNO, CABA, CAPLUS, CEABA-VTB, CIN, CONFSCI, CROPB, CROPU, DDFB, DDFU, DGENE, DISSABS, DRUGB, DRUGMONOG2, DRUGU, EMBAL, EMBASE, ...' ENTERED AT 09:24:11 ON 03 NOV 2006  
SEA (BETA-GLUCAN) AND (ANTIBODY OR IMMUNO?)

-----  
2 FILE ADISCTI  
4 FILE ADISINSIGHT  
2 FILE ADISNEWS  
98 FILE AGRICOLA  
2 FILE ANABSTR  
49 FILE AQUASCI  
63 FILE BIOENG  
448 FILE BIOSIS  
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L1 QUE (BETA-GLUCAN) AND (ANTIBODY OR IMMUNO?)  
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FILE 'MEDLINE, CAPLUS' ENTERED AT 09:26:24 ON 03 NOV 2006  
L2 1088 S (BETA-GLUCAN) AND (ANTIBODY OR IMMUNO?)  
L3 261 S L2 AND ANTIBODY  
L4 189 DUP REM L3 (72 DUPLICATES REMOVED)  
L5 20 S L4 AND CANCER  
L6 4 S L5 NOT PY>2001

FILE 'USPATFULL' ENTERED AT 09:28:33 ON 03 NOV 2006  
L7 481 S (BETA-GLUCAN) AND (ANTIBODY)  
L8 287 S L7 AND (CANCER OR NEOPLAS? OR TUMOR OR ANTITUMOR)  
L9 135 S L8 NOT PY>2003  
L10 91 S L8 NOT PY>2002  
L11 23 S L10 AND (SYNERG?)

FILE 'PCTFULL' ENTERED AT 09:31:12 ON 03 NOV 2006  
L12 159 S (BETA-GLUCAN) AND (ANTIBODY)  
L13 112 S L12 AND (CANCER OR NEOPLAS? OR TUMOR OR ANTITUMOR)  
L14 57 S L13 NOT PY>2003  
L15 17 S L14 AND (SYNERG?)

(FILE 'HOME' ENTERED AT 13:54:15 ON 03 NOV 2006)

INDEX 'ADISCTI, ADISINSIGHT, ADISNEWS, AGRICOLA, ANABSTR, ANTE, AQUALINE,  
AQUASCI, BIOENG, BIOSIS, BIOTECHABS, BIOTECHDS, BIOTECHNO, CABA, CAPLUS,  
CEABA-VTB, CIN, CONFSCI, CROPB, CROPU, DDFB, DDFU, DGENE, DISSABS, DRUGB,  
DRUGMONOG2, DRUGU, EMBAL, EMBASE, ...' ENTERED AT 13:54:23 ON 03 NOV 2006  
SEA CD20 AND (CANCER OR TUMOR OR NEOPLASTIC) AND ANTIBIDY

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SEA CD20 AND (CANCER OR TUMOR OR NEOPLA?) AND ANTIBODY

62 FILE ADISCTI  
29 FILE ADISINSIGHT  
12 FILE ADISNEWS  
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22 FILE BIOENG  
1355 FILE BIOSIS  
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183 FILE BIOTECHDS  
280 FILE BIOTECHNO  
8 FILE CABA  
729 FILE CAPLUS  
2 FILE CEABA-VTB  
22 FILE CIN  
298 FILE DDFU  
4129 FILE DGENE  
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459 FILE DRUGU  
9 FILE EMBAL  
1514 FILE EMBASE  
513 FILE ESBIOBASE  
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224 FILE JICST-EPLUS  
58 FILE LIFESCI  
784 FILE MEDLINE  
314 FILE PASCAL  
20 FILE PHAR  
26 FILE PHARMAML  
35 FILE PHIN  
403 FILE PROMT  
5 FILE PROUSDDR  
665 FILE SCISEARCH  
749 FILE TOXCENTER  
3182 FILE USPATFULL  
224 FILE USPAT2  
275 FILE WPIDS  
7 FILE WPIFV  
275 FILE WPINDEX

L1 QUE CD20 AND (CANCER OR TUMOR OR NEOPLA?) AND ANTIBODY

-----  
FILE 'EMBASE' ENTERED AT 13:56:25 ON 03 NOV 2006

L2 1514 S CD20 AND (CANCER OR TUMOR OR NEOPLA?) AND ANTIBODY  
L3 478 S L2 NOT PY>2001  
L4 350 S L2 NOT PY>2000  
L5 0 S L4 AND MONOCLONA  
L6 285 S L4 AND MONOCLONAL  
L7 285 S CD22 AND (CANCER OR TUMOR OR NEOPLA?) AND ANTIBODY  
L8 111 S L7 NOT PY>2000  
L9 94 S L8 AND MONOCLONAL  
L10 292 S CD25 AND (CANCER OR TUMOR OR NEOPLA?) AND MONOCLONAL AND ANTI  
L11 135 S L10 NOT PY>2000

=> file registry		SINCE FILE	TOTAL
COST IN U.S. DOLLARS		ENTRY	SESSION
FULL ESTIMATED COST		0.21	0.21

FILE 'REGISTRY' ENTERED AT 09:23:21 ON 03 NOV 2006  
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 provided by InfoChem.

STRUCTURE FILE UPDATES: 2 NOV 2006 HIGHEST RN 912331-22-7  
 DICTIONARY FILE UPDATES: 2 NOV 2006 HIGHEST RN 912331-22-7

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TSCA INFORMATION NOW CURRENT THROUGH June 30, 2006

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 conducting SmartSELECT searches.

REGISTRY includes numerically searchable data for experimental and  
 predicted properties as well as tags indicating availability of  
 experimental property data in the original document. For information  
 on property searching in REGISTRY, refer to:

<http://www.cas.org/ONLINE/UG/regprops.html>

```
=> exp beta-glucan/cn
E1      2      BETA-GLOBIN (HUMAN ISOLATE KURDISH JEW CLONE 61 GENE HBB)/CN
E2      1      BETA-GLOBIN (HUMAN)/CN
E3      0 --> BETA-GLUCAN/CN
E4      1      BETA-GLUCAN SYNTHESIS-ASSOCIATED PROTEIN (CRYPTOCOCCUS NEOFO
RMANS NEOFORMANS STRAIN JEC21)/CN
E5      1      BETA-GLUCANASE (ARABIDOPSIS THALIANA CLONE BAC F19G10 GENE F
19G10.16)/CN
E6      1      BETA-GLUCANASE (BACTEROIDES FRAGILIS STRAIN ATCC25285)/CN
E7      1      BETA-GLUCANASE (CAULOBACTER CRESCENTUS GENE CC0380)/CN
E8      1      BETA-GLUCANASE (COLWELLIA PSYCHRERYTHRAEA STRAIN 34H GENE BG
LA)/CN
E9      1      BETA-GLUCANASE (MYCOBACTERIUM TUBERCULOSIS STRAIN CDC1551 GE
NE MT0329)/CN
E10     1      BETA-GLUCANASE (PROPIONIBACTERIUM ACNES STRAIN KPA171202)/CN
E11     6      BETA-GLUCANASE PRECURSOR (BACTEROIDES FRAGILIS STRAIN YCH46)
/CN
E12     1      BETA-GLUCANASE PRECURSOR (BACTEROIDES THETAIOTAOMICRON STRAI
N VPI-5482 GENE BT2550)/CN
```

```
=> exp glucan
E1      1      GLUCAMYL/BI
E2      1      GLUCAMYLASE/BI
E3      5811 --> GLUCAN/BI
E4      1      GLUCAN:B/BI
E5      2053    GLUCANASE/BI
E6      12     GLUCANASES/BI
E7      2      GLUCANEX/BI
E8      1      GLUCANGINA/BI
E9      7      GLUCANHYDR/BI
E10     7      GLUCANHYDROL/BI
E11     7      GLUCANHYDROLASE/BI
E12     1      GLUCANIL/BI
```

=> exp glucan/cn

E1 1 GLUCAMONIX/CN  
E2 1 GLUCAMYLASE/CN  
E3 1 --> GLUCAN/CN  
E4 1 GLUCAN (1,4-ALPHA-), BRANCHING ENZYME 1 (GLYCOGEN BRANCHING ENZYME) (HUMAN CLONE MGC:20071 IMAGE:4574938)/CN  
E5 1 GLUCAN (1,4-ALPHA-), BRANCHING ENZYME 1 (MOUSE CLONE MGC:288 68 IMAGE:4526961)/CN  
E6 1 GLUCAN 1,4-ALPHA-GLUCOSIDASE (NEUROSPORA CRASSA GENE B5022. 070)/CN  
E7 1 GLUCAN 1,3 BETA-GLUCOSIDASE PROTEIN (CRYPTOCOCCUS NEOFORMANS NEOFORMANS STRAIN JEC21)/CN  
E8 1 GLUCAN 1,3-B-GLUCANASE/CN  
E9 1 GLUCAN 1,3-B-GLUCOSIDASE/CN  
E10 1 GLUCAN 1,3-B-GLUCOSIDASE (PHANEROCHAETE CHRYSOSPORIUM S TRAIN K-3 GENE LAM55A PRECURSOR)/CN  
E11 1 GLUCAN 1,3-BETA-GLUCOSIDASE (CRYPTOCOCCUS NEOFORMANS NEOFORMANS STRAIN JEC21)/CN  
E12 1 GLUCAN 1,3-BETA-GLUCOSIDASE PRECURSOR (ORYZA SATIVA JAPONICA GENE OJ1003C07.1)/CN

=> exp beta glucan/cn.

E1 1 BETA GLOBULIN/CN  
E2 1 BETA GLOBULINS/CN  
E3 0 --> BETA GLUCAN/CN  
E4 1 BETA GLUCOSAMINIDASE (XANTHOMONAS CAMPESTRIS VESICATORIA STRAIN 85-10)/CN  
E5 1 BETA GLUCOSIDASE (MYCOPLASMA PENETRANS STRAIN HF-2 GENE MYPE 4550)/CN  
E6 1 BETA GLUCOSIDASE (MYCOPLASMA PENETRANS STRAIN HF-2 GENE MYPE 4560)/CN  
E7 1 BETA GLUCOSIDASE-LIKE PROTEIN (PLEOSPORA P56 STRAIN P56 GENE BGL1)/CN  
E8 1 BETA GLUCOSIDASE-LIKE PROTEIN (STEMPHYLIUM XANTHOSOMATIS STRAIN EGS17-137 ISOLATE P232 GENE BGL1)/CN  
E9 1 BETA III/CN  
E10 1 BETA ISOFORM OF REGULATORY SUBUNIT A, PROTEIN PHOSPHATASE 2, ISOFORM B (HUMAN CLONE MGC:26454 IMAGE:4831056)/CN  
E11 1 BETA ISOFORM OF REGULATORY SUBUNIT B55, PROTEIN PHOSPHATASE 2, ISOFORM A (HUMAN CLONE MGC:24888 IMAGE:4939981)/CN  
E12 1 BETA KETOACYL-ACYL CARRIER PROTEIN SYNTHASE (THERMOSYNECHOCUS ELONGATUS STRAIN BP-1 GENE TLR0622)/CN

=> index bioscience

FILE 'DRUGMONOG' ACCESS NOT AUTHORIZED

COST IN U.S. DOLLARS

	SINCE FILE ENTRY	TOTAL SESSION
FULL ESTIMATED COST	0.44	0.65

INDEX 'ADISCTI, ADISINSIGHT, ADISNEWS, AGRICOLA, ANABSTR, ANTE, AQUALINE, AQUASCI, BIOENG, BIOSIS, BIOTECHABS, BIOTECHDS, BIOTECHNO, CABA, CAPLUS, CEABA-VTB, CIN, CONFSCI, CROPB, CROPU, DDFB, DDFU, DGENE, DISSABS, DRUGB, DRUGMONOG2, DRUGU, EMBAL, EMBASE, ...' ENTERED AT 09:24:11 ON 03 NOV 2006

68 FILES IN THE FILE LIST IN STNINDEX

Enter SET DETAIL ON to see search term postings or to view search error messages that display as 0\* with SET DETAIL OFF.

=> s (beta-glucan) and (antibody or immuno?)

2 FILE ADISCTI  
4 FILE ADISINSIGHT  
2 FILE ADISNEWS

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98  FILE AGRICOLA
 2  FILE ANABSTR
49  FILE AQUASCI
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448 FILE BIOSIS
43  FILE BIOTECHABS
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12 FILES SEARCHED...
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21  FILE FSTA
34 FILES SEARCHED...
55  FILE GENBANK
84  FILE IFIPAT
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217 FILE JICST-EPLUS
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195 FILE LIFESCI
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48 FILES SEARCHED...
8  FILE PHAR
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52 FILES HAVE ONE OR MORE ANSWERS, 68 FILES SEARCHED IN STNINDEX

L1 QUE (BETA-GLUCAN) AND (ANTIBODY OR IMMUNO?)

=> file medline caplus  
COST IN U.S. DOLLARS

FULL ESTIMATED COST

SINCE FILE ENTRY	TOTAL SESSION
2.44	3.09

FILE 'MEDLINE' ENTERED AT 09:26:24 ON 03 NOV 2006

FILE 'CAPLUS' ENTERED AT 09:26:24 ON 03 NOV 2006  
USE IS SUBJECT TO THE TERMS OF YOUR STN CUSTOMER AGREEMENT.  
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=> s (beta-glucan) and (antibody or immuno?)  
L2 1088 (BETA-GLUCAN) AND (ANTIBODY OR IMMUNO?)

=> s l2 and antibody  
L3 261 L2 AND ANTIBODY

=> dup rem l3  
PROCESSING COMPLETED FOR L3  
L4 189 DUP REM L3 (72 DUPLICATES REMOVED)

=> s l4 and cancer  
L5 20 L4 AND CANCER

=> d 15 1-20 ti

L5 ANSWER 1 OF 20 MEDLINE on STN  
TI Oral (1-->3),(1-->4)-beta-D-glucan synergizes with antiganglioside GD2 monoclonal antibody 3F8 in the therapy of neuroblastoma.

L5 ANSWER 2 OF 20 MEDLINE on STN  
TI Plants, polysaccharides, and the treatment and prevention of neoplasia.

L5 ANSWER 3 OF 20 MEDLINE on STN  
TI Failure in antitumor activity by overdose of an immunomodulating beta-glucan preparation, sonifilan.

L5 ANSWER 4 OF 20 MEDLINE on STN  
TI Polymeric drugs based on conjugates of synthetic and natural macromolecules. II. Anti-cancer activity of antibody or (Fab') (2)-targeted conjugates and combined therapy with immunomodulators.

L5 ANSWER 5 OF 20 CAPLUS COPYRIGHT 2006 ACS on STN  
TI Therapy-enhancing glucan

L5 ANSWER 6 OF 20 CAPLUS COPYRIGHT 2006 ACS on STN  
TI Yeast .beta.-Glucan Amplifies Phagocyte Killing of iC3b-Opsonized Tumor Cells via Complement Receptor 3-Syk- Phosphatidylinositol 3-Kinase Pathway

L5 ANSWER 7 OF 20 CAPLUS COPYRIGHT 2006 ACS on STN  
TI Cross-linking tumor cells with effector cells via CD55 with a bispecific mAb induces .beta.-glucan-dependent CR3-dependent cellular cytotoxicity

L5 ANSWER 8 OF 20 CAPLUS COPYRIGHT 2006 ACS on STN  
TI  $\beta$ -glucans: Old molecules with newly discovered immunological activities

L5 ANSWER 9 OF 20 CAPLUS COPYRIGHT 2006 ACS on STN  
TI Yeast whole glucan particle (WGP) .beta.-glucan in conjunction with antitumor monoclonal antibodies to treat cancer

L5 ANSWER 10 OF 20 CAPLUS COPYRIGHT 2006 ACS on STN  
TI Methods and compositions for producing increased antigenic response using adenosine A1 receptor-activating agents

L5 ANSWER 11 OF 20 CAPLUS COPYRIGHT 2006 ACS on STN  
TI Anti .beta.-glucan antibody in cancer patients (preliminary report)

L5 ANSWER 12 OF 20 CAPLUS COPYRIGHT 2006 ACS on STN  
TI Cancer therapy using .beta.-glucan and monoclonal antibodies

L5 ANSWER 13 OF 20 CAPLUS COPYRIGHT 2006 ACS on STN  
TI Cancer therapy using whole glucan particles and antibodies

L5 ANSWER 14 OF 20 CAPLUS COPYRIGHT 2006 ACS on STN  
TI Immunomodulating activity of a .beta.-glucan preparation, SCG, extracted from a culinary-medicinal mushroom, Sparassis crispa Wulf.:Fr. (aphyllophoromycetideae), and application to cancer patients

L5 ANSWER 15 OF 20 CAPLUS COPYRIGHT 2006 ACS on STN  
TI Complement function in mAb-mediated cancer immunotherapy

L5 ANSWER 16 OF 20 CAPLUS COPYRIGHT 2006 ACS on STN  
TI Determination of the potential use of beta-glucan as an adjuvant for monoclonal antibody immunotherapy of cancer

L5 ANSWER 17 OF 20 CAPLUS COPYRIGHT 2006 ACS on STN  
TI Macrophage receptor Dectin-1

L5 ANSWER 18 OF 20 CAPLUS COPYRIGHT 2006 ACS on STN  
TI Orally administered  $\beta$ -glucans enhance anti-tumor effects of monoclonal antibodies

L5 ANSWER 19 OF 20 CAPLUS COPYRIGHT 2006 ACS on STN  
TI Antitumor antibody-enhancing glucan

L5 ANSWER 20 OF 20 CAPLUS COPYRIGHT 2006 ACS on STN  
TI Interrelation of structure and antitumor effects of fungal (1 $\rightarrow$ 3)  $\beta$ -D-glucans.

=> s 15 not py>2001  
L6 4 L5 NOT PY>2001

=> d 16 1-4 ti

L6 ANSWER 1 OF 4 MEDLINE on STN  
TI Plants, polysaccharides, and the treatment and prevention of neoplasia.

L6 ANSWER 2 OF 4 MEDLINE on STN  
TI Failure in antitumor activity by overdose of an immunomodulating beta-glucan preparation, sonifilan.

L6 ANSWER 3 OF 4 MEDLINE on STN  
TI Polymeric drugs based on conjugates of synthetic and natural macromolecules. II. Anti-cancer activity of antibody or (Fab')<sub>2</sub>-targeted conjugates and combined therapy with immunomodulators.

L6 ANSWER 4 OF 4 CAPLUS COPYRIGHT 2006 ACS on STN  
TI Interrelation of structure and antitumor effects of fungal (1 $\rightarrow$ 3)  $\beta$ -D-glucans.

=> d 16 1 2 3 4 ti abs bib

L6 ANSWER 1 OF 4 MEDLINE on STN  
TI Plants, polysaccharides, and the treatment and prevention of neoplasia.  
AB Plants and Fungi have traditionally been the single largest source of lead compounds for the development of therapeutics by the pharmaceutical industry. Currently mushroom and plant polysaccharides brought to attention by Complementary and Alternative medicine, are undergoing scientific analysis and development to prevent and treat cancer. Two classes of saccharides are under investigation-beta glucan polysaccharides as biological response modifiers for the adjuvant treatment of cancer and "Oligosaccharin"-related oligosaccharides for the prevention of sun-induced skin cancer. Beta glucans already in human trials in the Far East will require mechanistic pharmacologic studies and definition of structure function relationships before they are ready for clinical trials in the West. Other beta glucans that prime natural killer cells for antibody dependent cell-mediated cytotoxicity are approaching clinical trials. Oligosaccharides that downregulate production of immunosuppressive cytokines by ultraviolet radiation injured keratinocytes are promising agents for the prevention of environmental skin cancer.

AN 2001267405 MEDLINE  
DN PubMed ID: 11358267  
TI Plants, polysaccharides, and the treatment and prevention of neoplasia.  
AU Pelley R P; Strickland F M  
CS Pangea Phytoceuticals, Harlingen, TX, 78550, USA.  
NC CAR29-70383 (NCI)  
CAR43-80423 (NCI)  
SO Critical reviews in oncogenesis, (2000) Vol. 11, No. 3-4, pp. 189-225.  
Ref: 193  
Journal code: 8914610. ISSN: 0893-9675.  
CY United States  
DT Journal; Article; (JOURNAL ARTICLE)  
General Review; (REVIEW)  
LA English  
FS Priority Journals  
EM 200110  
ED Entered STN: 22 Oct 2001  
Last Updated on STN: 22 Oct 2001  
Entered Medline: 18 Oct 2001

L6 ANSWER 2 OF 4 MEDLINE on STN  
TI Failure in antitumor activity by overdose of an immunomodulating beta-glucan preparation, sonifilan.  
AB Schizophyllan (SPG, Sonifilan) is a soluble (1-->3)-beta-D-glucan, used as a biological response modifier (BRM) with radiation therapy for cancer treatment in Japan. The mechanism of SPG mediated antitumor activity is thought to be via immune stimulation, which includes cytokine production, hematopoietic response, and so on. In this paper, we found that the activity of SPG was quite long-lived and an overdose significantly failed to display the antitumor activity. To demonstrate the mechanism several parameters were examined using a high dose of SPG administration as follows: i) the effect on vascular permeability in vivo, ii) the priming effect on tumor necrosis factor (TNF-alpha) production in vivo, iii) the effect on macrophage adherence to plastic plate in vitro, and iv) anti-Sarcoma 180 antibody production in vivo. It was evident that vascular permeability and anti-Sarcoma 180 antibody production remained unchanged, but TNF-alpha production and adherence to a plastic plate was significantly reduced by a high dose of SPG. These facts strongly suggested that modulation of the cytokine syntheses and the leukocyte traffic would be the causative mechanisms of the failure of antitumor activity by an overdose of SPG.

AN 2000168912 MEDLINE  
DN PubMed ID: 10706395  
TI Failure in antitumor activity by overdose of an immunomodulating

AU beta-glucan preparation, sonifilan.  
AU Miura T; Miura N N; Ohno N; Adachi Y; Shimada S; Yadomae T  
CS Laboratory for Immunopharmacology of Microbial Products, School of  
Pharmacy, Tokyo University of Pharmacy and Life Science, Hachioji, Japan.  
SO Biological & pharmaceutical bulletin, (2000 Feb) Vol. 23, No. 2, pp.  
249-53.  
Journal code: 9311984. ISSN: 0918-6158.  
CY Japan  
DT Journal; Article; (JOURNAL ARTICLE)  
LA English  
FS Priority Journals  
EM 200004  
ED Entered STN: 21 Apr 2000  
Last Updated on STN: 21 Apr 2000  
Entered Medline: 13 Apr 2000

L6 ANSWER 3 OF 4 MEDLINE on STN  
TI Polymeric drugs based on conjugates of synthetic and natural  
macromolecules. II. Anti-cancer activity of antibody  
or (Fab') (2)-targeted conjugates and combined therapy with  
immunomodulators.  
AB We provide data on in vivo targeting of the Thy 1.2 (CDw90) cell surface  
receptor expressed on neoplastic T cells, mouse EL4 T cell lymphoma. The  
targeting antibody and the anticancer drug, doxorubicin (DOX)  
were conjugated to a water-soluble copolymer based on N-(2-  
hydroxypropyl)methacrylamide (HPMA) acting as a carrier responsible for  
controlled intracellular release of the conjugated drug. The in vivo  
therapeutic efficacy of HPMA copolymer-bound DOX targeted with anti-EL4  
antibody, polyclonal anti-thymocyte globulin (ATG), monoclonal  
anti-Thy 1.2 antibody or its F(ab') (2) fragment was compared  
with the efficacy of DOX conjugated to HPMA copolymer containing  
nonspecific IgG or bovine serum albumin (BSA). Anti-EL4 antibody  
-targeted conjugate caused a significant retardation of tumor growth and  
an extension of the life span of treated mice. The effect was comparable  
with that of HPMA copolymer-bound DOX targeted with ATG, anti-Thy 1.2  
antibody or its F(ab') (2) fragment. However, considerable  
antitumor effect was seen also in conjugates targeted instead of specific  
antibodies with syngeneic nonspecific IgG or BSA. Patients with advanced  
cancer are often immunocompromised due to dysfunction of  
their immune system induced by cancer and cytotoxic drugs. A  
significant decrease of unwanted side-effects of targeted drugs against a  
number of vital organs was already documented. In this study we have  
compared immunotoxic effects of free DOX with those of its  
antibody-targeted form on NK cells and cytolytic T lymphocytes  
(CTLs) isolated from C57BL/10 mice bearing EL4 T cell lymphoma. In the  
same model we have tested the combination therapy with  
immunomodulators (beta-glucan or AM-2)  
injected together with targeted daunomycin. We have observed a  
significant protective effect of targeted DOX against NK cells and CTLs.  
Moreover, the data revealed that combination therapy considerably enhances  
antitumor efficacy of the targeted anticancer drug.  
AN 2000109236 MEDLINE  
DN PubMed ID: 10640661  
TI Polymeric drugs based on conjugates of synthetic and natural  
macromolecules. II. Anti-cancer activity of antibody  
or (Fab') (2)-targeted conjugates and combined therapy with  
immunomodulators.  
AU Rihova B; Jelinkova M; Strohalm J; Subr V; Plocova D; Hovorka O; Novak M;  
Plundrova D; Germano Y; Ulbrich K  
CS Institute of Microbiology, Academy of Sciences of the Czech Republic,  
Videnska 1083, 142 20, Prague, Czech Republic.  
SO Journal of controlled release : official journal of the Controlled Release  
Society, (2000 Feb 14) Vol. 64, No. 1-3, pp. 241-61.  
Journal code: 8607908. ISSN: 0168-3659.

CY Netherlands  
 DT Journal; Article; (JOURNAL ARTICLE)  
 LA English  
 FS Priority Journals  
 EM 200003  
 ED Entered STN: 7 Apr 2000  
 Last Updated on STN: 7 Apr. 2000  
 Entered Medline: 30 Mar 2000

L6 ANSWER 4 OF 4 CAPLUS COPYRIGHT 2006 ACS on STN  
 TI Interrelation of structure and antitumor effects of fungal (1→3)  
 $\beta$ -D-glucans.  
 AB In the last 25 yr chemical and pharmacol. studies have been focused on the non-cytotoxic, immunomodulating polysaccharides. Yeast and related fungal (1→3)- $\beta$ -D-glucans, especially, those having appropriate O-6- $\beta$ -D-glucosyl branches (db, 1/3 to 1/5) exhibited strong antitumor effects, and can be used as an immnumostimulator in cancer therapy. Such antitumor effects may be due to the triple helix of the backbone; (1→6)-. beta.-glucan of lichen and also synthetic branched (1→4)- $\beta$ -D-glucans were inactive. In addition, our extensive studies on the structure-activity relationship using various branched (1→3)- $\beta$ -D-glucans (db, 1/25 - 3/4) showed that the distribution of the branches along the backbone and their mol. shapes may also play a role in expression of antitumor activity, as indicated by modification of the side chains. We will discuss interrelation of structure and antitumor effects of immunomodifying glucans, e.g., an exocellular glucan of Pestalotia sp (db, 3/5), and a highly active glucan (db. 1/4) from Volvariella volvaceas, and also antibody specificities of Volvariella glucan.  
 AN 1996:412276 CAPLUS  
 TI Interrelation of structure and antitumor effects of fungal (1→3)  
 $\beta$ -D-glucans.  
 AU Misaki, A.; Kakuta, M.; Kishida, Etsu  
 CS Faculty Human Life Science, Osaka City University, Sumiyoshi, 558, Japan  
 SO Book of Abstracts, 212th ACS National Meeting, Orlando, FL, August 25-29 (1996), CARB-042 Publisher: American Chemical Society, Washington, D. C.  
 CODEN: 63BFAC  
 DT Conference; Meeting Abstract  
 LA English

=> file uspatfull	SINCE FILE	TOTAL
COST IN U.S. DOLLARS	ENTRY	SESSION
FULL ESTIMATED COST	24.36	27.45
DISCOUNT AMOUNTS (FOR QUALIFYING ACCOUNTS)	SINCE FILE	TOTAL
	ENTRY	SESSION
CA SUBSCRIBER PRICE	-0.75	-0.75

FILE 'USPATFULL' ENTERED AT 09:28:33 ON 03 NOV 2006  
 CA INDEXING COPYRIGHT (C) 2006 AMERICAN CHEMICAL SOCIETY (ACS)

FILE COVERS 1971 TO PATENT PUBLICATION DATE: 2 Nov 2006 (20061102/PD)  
 FILE LAST UPDATED: 2 Nov 2006 (20061102/ED)  
 HIGHEST GRANTED PATENT NUMBER: US7131145  
 HIGHEST APPLICATION PUBLICATION NUMBER: US2006248622  
 CA INDEXING IS CURRENT THROUGH 31 Oct 2006 (20061031/UPCA)  
 ISSUE CLASS FIELDS (/INCL) CURRENT THROUGH: 2 Nov 2006 (20061102/PD)  
 REVISED CLASS FIELDS (/NCL) LAST RELOADED: Jun 2006  
 USPTO MANUAL OF CLASSIFICATIONS THESAURUS ISSUE DATE: Jun 2006

=> s (beta-glucan) and (antibody)  
413891 BETA  
4791 GLUCAN  
1450 BETA-GLUCAN  
(BETA(W) GLUCAN).

L7 124954 ANTIBODY  
481 (BETA-GLUCAN) AND (ANTIBODY)

=> s 17 and (cancer or neoplas? or tumor or antitumor)  
122075 CANCER  
34787 NEOPLAS?  
96174 TUMOR  
16887 ANTITUMOR

L8 287 L7 AND (CANCER OR NEOPLAS? OR TUMOR OR ANTITUMOR)

=> s 18 not py>2003.  
1145961 PY>2003

L9 135 L8 NOT PY>2003

=> s 18 not py>2002  
1434321 PY>2002

L10 91 L8 NOT PY>2002

=> s l10 and (synerg?)  
81484 SYNERG?

L11 23 L10 AND (SYNERG?)

=> d l11 1-23 ti

L11 ANSWER 1 OF 23 USPATFULL on STN  
TI Nucleic acids for identifying anti-fungal agents, and uses related thereto

L11 ANSWER 2 OF 23 USPATFULL on STN  
TI Dietary supplement compositions

L11 ANSWER 3 OF 23 USPATFULL on STN  
TI Methods and compositions for producing a neurosalutary effect in a subject

L11 ANSWER 4 OF 23 USPATFULL on STN  
TI ASSAYS AND REAGENTS FOR IDENTIFYING ANTI-FUNGAL AGNETS, AMD USES RELATED THERETO

L11 ANSWER 5 OF 23 USPATFULL on STN  
TI NEW APPLICATION OF LYSOZYME DIMER

L11 ANSWER 6 OF 23 USPATFULL on STN  
TI Compositions and methods for inhibiting fungal growth

L11 ANSWER 7 OF 23 USPATFULL on STN  
TI Evolution of whole cells and organisms by recursive sequence recombination

L11 ANSWER 8 OF 23 USPATFULL on STN  
TI Evolution of whole cells and organisms by recursive sequence recombination

L11 ANSWER 9 OF 23 USPATFULL on STN  
TI Evolution of whole cells and organisms by recursive sequence recombination

L11 ANSWER 10 OF 23 USPATFULL on STN  
TI Evolution of whole cells and organisms by recursive sequence recombination

recombination

- L11 ANSWER 11 OF 23 USPATFULL on STN  
TI Therapeutic methods employing disulfide derivatives of dithiocarbonates and compositions useful therefor
- L11 ANSWER 12 OF 23 USPATFULL on STN  
TI Evolution of whole cells and organisms by recursive sequence recombination
- L11 ANSWER 13 OF 23 USPATFULL on STN  
TI Assays and reagents for identifying anti-fungal agents, and uses related thereto
- L11 ANSWER 14 OF 23 USPATFULL on STN  
TI Assays and reagents for identifying anti-fungal agents, and uses related thereto
- L11 ANSWER 15 OF 23 USPATFULL on STN  
TI Evolution of whole cells and organisms by recursive sequence recombination
- L11 ANSWER 16 OF 23 USPATFULL on STN  
TI Applications of lysozyme dimer
- L11 ANSWER 17 OF 23 USPATFULL on STN  
TI Assays and reagents for identifying anti-fungal agents and uses related thereto
- L11 ANSWER 18 OF 23 USPATFULL on STN  
TI Rho target protein human mDia and gene encoding same
- L11 ANSWER 19 OF 23 USPATFULL on STN  
TI Therapeutic methods employing disulfide derivatives of dithiocarbamates and compositions useful therefor
- L11 ANSWER 20 OF 23 USPATFULL on STN  
TI Compositions and methods for modulating cell proliferation using growth factor-polysaccharide binding fusion proteins
- L11 ANSWER 21 OF 23 USPATFULL on STN  
TI Glucan drug delivery system and adjuvant
- L11 ANSWER 22 OF 23 USPATFULL on STN  
TI Glucan drug delivery system and adjuvant
- L11 ANSWER 23 OF 23 USPATFULL on STN  
TI Glucan drug delivery system and adjuvant

=> d l11 21-23 ti abs bib

- L11 ANSWER 21 OF 23 USPATFULL on STN  
TI Glucan drug delivery system and adjuvant  
AB The invention describes a whole .beta.-glucan drug delivery vehicle that non-specifically enhances the immune response, and is safe for human use. A drug is incorporated into a whole .beta.-glucan microparticle, and the combination is administered to an individual. The .beta.-glucan vehicle allows sustained release of the drug component while simultaneously enhancing the effectiveness of the drug by boosting the individual's endogenous immune response.

AN 1998:42071 USPATFULL

TI Glucan drug delivery system and adjuvant  
IN Jamas, Spiros, Boston, MA, United States  
Ostroff, Gary R., Worcester, MA, United States  
Easson, Jr., D. Davidson, Shrewsbury, MA, United States  
PA Alpha-Beta Technology, Inc., Worcester, MA, United States (U.S.  
corporation)  
PI US 5741495 19980421  
AI US 1997-810947 19970227 (8)  
RLI Continuation of Ser. No. US 1991-778177, filed on 13 Dec 1991, now  
patented, Pat. No. US 5607677 which is a continuation-in-part of Ser.  
No. US 1989-366490, filed on 15 Jun 1989, now patented, Pat. No. US  
5032401, issued on 16 Jul 1991  
DT Utility  
FS Granted  
EXNAM Primary Examiner: Woodward, Michael P.  
LREP Hamilton, Brook, Smith & Reynolds, P.C.  
CLMN Number of Claims: 2  
ECL Exemplary Claim: 1  
DRWN 7 Drawing Figure(s); 7 Drawing Page(s)  
LN.CNT 525

L11 ANSWER 22 OF 23 USPATFULL on STN

TI Glucan drug delivery system and adjuvant  
AB The invention describes a whole .beta.-glucan drug  
delivery vehicle that non-specifically enhances the immune response, and  
is safe for human use. A drug is incorporated into a whole .beta  
.glucan microparticle, and the combination is administered to  
an individual. The .beta.-glucan vehicle allows  
sustained release of the drug component while simultaneously enhancing  
the effectiveness of the drug by boosting the individual's endogenous  
immune response.

AN 97:17904 USPATFULL  
TI Glucan drug delivery system and adjuvant  
IN Jamas, Spiros, Boston, MA, United States  
Ostroff, Gary R., Worcester, MA, United States  
Easson, Jr., D. Davidson, Shrewsbury, MA, United States  
PA Alpha-Beta Technology, Inc., Worcester, MA, United States (U.S.  
corporation)  
PI US 5607677 19970304  
AI US 1991-778177 19911213 (7)  
WO 1990-US3440 19900614  
19911213 PCT 371 date  
19911213 PCT 102(e) date

DDC 20080716  
RLI Continuation-in-part of Ser. No. US 1989-366490, filed on 15 Jun 1989,  
now patented, Pat. No. US 5032401  
DT Utility  
FS Granted  
EXNAM Primary Examiner: Woodward, Michael P.  
LREP Hamilton, Brook, Smith & Reynolds, P.C.  
CLMN Number of Claims: 1  
ECL Exemplary Claim: 1  
DRWN 7 Drawing Figure(s); 7 Drawing Page(s)  
LN.CNT 495

L11 ANSWER 23 OF 23 USPATFULL on STN

TI Glucan drug delivery system and adjuvant  
AB The invention describes a whole .beta.-glucan drug  
delivery vehicle that non-specifically enhances the immune response, and  
is safe for human use. A drug is incorporated into a whole .beta  
.glucan microparticle, and the combination is administered to  
an individual. The .beta.-glucan vehicle allows  
sustained release of the drug component while simultaneously enhancing

the effectiveness of the drug by boosting the individual's endogenous immune response.

AN 91:56740 USPATFULL  
TI Glucan drug delivery system and adjuvant  
IN Jamas, Spiros, Boston, MA, United States  
Ostroff, Gary R., Worcester, MA, United States  
Easson, Jr., D. Davidson, Shrewsbury, MA, United States  
PA Alpha Beta Technology, Worcester, MA, United States (U.S. corporation)  
PI US 5032401 19910716  
AI US 1989-366490 19890615 (7)  
DT Utility  
FS Granted  
EXNAM Primary Examiner: Page, Thurman; Assistant Examiner: Kishorl, G. S.  
LREP Hamilton, Brook, Smith & Reynolds  
CLMN Number of Claims: 6  
ECL Exemplary Claim: 1  
DRWN 5 Drawing Figure(s); 5 Drawing Page(s)  
LN.CNT 477

	SINCE FILE ENTRY	TOTAL SESSION
=> file pctfull COST IN U.S. DOLLARS		
FULL ESTIMATED COST	11.72	39.17
DISCOUNT AMOUNTS (FOR QUALIFYING ACCOUNTS)	SINCE FILE ENTRY	TOTAL SESSION
CA SUBSCRIBER PRICE	0.00	-0.75

FILE 'PCTFULL' ENTERED AT 09:31:12 ON 03 NOV 2006

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FILE LAST UPDATED: 30 OCT 2006 <20061030/UP>  
MOST RECENT UPDATE WEEK: 200643 <200643/EW>  
FILE COVERS 1978 TO DATE

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>>> NEW IPC8 DATA AND FUNCTIONALITY NOW AVAILABLE IN THIS FILE.

SEE

<http://www.stn-international.de/stndatabases/details/ ipc-reform.html> >>>

>>> FOR CHANGES IN PCTFULL PLEASE SEE HELP CHANGE  
(last updated April 10, 2006) <<

>>> NEW PRICES IN PCTFULL AS OF 01 JULY 2006. FOR DETAILS,  
PLEASE SEE HELP COST <<

=> s (beta-glucan) and (antibody)

83003 BETA

2975 GLUCAN

557 BETA-GLUCAN

(BETA(W)GLUCAN)

78521 ANTIBODY

L12 159 (BETA-GLUCAN) AND (ANTIBODY)

=> s l12 and (cancer or neoplas? or tumor or antitumor)

78173 CANCER

24008 NEOPLAS?

58534 TUMOR

9228 ANTITUMOR

L13 112 L12 AND (CANCER OR NEOPLAS? OR TUMOR OR ANTITUMOR)

=> s l13 not py>2003  
351754 PY>2003  
L14 57 L13 NOT PY>2003

=> s l14 and (synerg?)  
37891 SYNERG?  
L15 17 L14 AND (SYNERG?)

=> d l15 1-17 ti

L15 ANSWER 1 OF 17 PCTFULL COPYRIGHT 2006 Univentio on STN  
TIEN ACTIVE FRACTION HAVING ANTI-CANCER AND ANTI-METASTASIS  
TIFR ISOLATED FROM ACANTHOPanax SPECIES AND FRUITS  
FRACTION ACTIVE CONTRE LE CANCER ET CONTRE LES METASTASES,  
ISOLEE D'ESPECES ET DE FRUITS DU GENRE ACANTHOPanax

L15 ANSWER 2 OF 17 PCTFULL COPYRIGHT 2006 Univentio on STN  
TIEN ACTIVE FRACTION HAVING ANTI-CANCER AND ANTI-METASTASIS  
TIFR ISOLATED FROM LEAVES AND STEMS OF GINSENG  
FRACTION ACTIVE A PROPRIETES ANTI-CANCEREUSES ET ANTI-METASTASIQUES  
ISOLEE A PARTIR DE FEUILLES ET DE TIGES DE GINSENG

L15 ANSWER 3 OF 17 PCTFULL COPYRIGHT 2006 Univentio on STN  
TIEN BARLEY WITH ALTERED BRANCHING ENZYME ACTIVITY AND STARCH AND STARCH  
CONTAINING PRODUCTS WITH AN INCREASED AMYLOSE CONTENT  
TIFR ORGE A ACTIVITE ENZYMATIQUE RAMIFIANTE ET AMIDON, ET PRODUITS A BASE  
D'AMIDON A TENEUR ACCRUE EN AMYLOSE

L15 ANSWER 4 OF 17 PCTFULL COPYRIGHT 2006 Univentio on STN  
TIEN TREATMENT OF DISEASES INVOLVING DEFECTIVE GAP JUNCTIONAL COMMUNICATION  
TIFR TRAITEMENT DE MALADIES IMPLIQUANT LA COMMUNICATION DEFECTUEUSE DE LA  
JONCTION LACUNAIRE

L15 ANSWER 5 OF 17 PCTFULL COPYRIGHT 2006 Univentio on STN  
TIEN PLANT DISEASE RESISTANCE GENES  
TIFR GENES DE RESISTANCE AUX MALADIES CHEZ LES PLANTES

L15 ANSWER 6 OF 17 PCTFULL COPYRIGHT 2006 Univentio on STN  
TIEN PLANT GENES INVOLVED IN DEFENSE AGAINST PATHOGENS  
TIFR GENES DE PLANTES INTERVENANT DANS LA DEFENSE CONTRE DES PATHOGENES

L15 ANSWER 7 OF 17 PCTFULL COPYRIGHT 2006 Univentio on STN  
TIEN MACROPHAGE RECEPTOR  
TIFR RECEPTEUR DES MACROPHAGES

L15 ANSWER 8 OF 17 PCTFULL COPYRIGHT 2006 Univentio on STN  
TIEN THERAPY-ENHANCING GLUCAN  
TIFR GLUCANE AMELIORANT UNE THERAPIE

L15 ANSWER 9 OF 17 PCTFULL COPYRIGHT 2006 Univentio on STN  
TIEN BARLEY WITH REDUCED SSII ACTIVITY AND STARCH CONTAINING PRODUCTS WITH A  
REDUCED AMYLOPECTIN CONTENT  
TIFR ORGE POSSEDANT UNE ACTIVITE ENZYMATIQUE SSII LIMITEE ET PRODUITS  
CONTENANT DE L'AMIDON ET UNE TENEUR LIMITEE EN AMYLOPECTINE

L15 ANSWER 10 OF 17 PCTFULL COPYRIGHT 2006 Univentio on STN  
TIEN WHOLE CELL ENGINEERING BY MUTAGENIZING A SUBSTANTIAL PORTION OF A  
STARTING GENOME, COMBINING MUTATIONS, AND OPTIONAL REPETITION  
TIFR MANIPULATION DE CELLULE ENTIERE PAR MUTAGENESE D'UNE PARTIE  
SUBSTANTIELLE D'UN GENOME DE DEPART, PAR COMBINAISON DE MUTATIONS ET  
EVENTUELLEMENT PAR REPETITION

L15 ANSWER 11 OF 17 PCTFULL COPYRIGHT 2006 Univentio on STN  
TIEN PROMOTERS FOR REGULATION OF PLANT GENE EXPRESSION

TIFR PROMOTEURS UTILES POUR REGULER L'EXPRESSION GENIQUE DES PLANTES

L15 ANSWER 12 OF 17 PCTFULL COPYRIGHT 2006 Univentio on STN  
TIEN WHOLE CELL ENGINEERING BY MUTAGENIZING A SUBSTANTIAL PORTION OF A  
STARTING GENOME, COMBINING MUTATIONS, AND OPTIONAL REPEATING

TIFR INGENIERIE CELLULAIRE COMPLETE PAR MUTAGENESE D'UNE PARTIE SUBSTANTIELLE  
D'UN GENOME DE DEPART, PAR COMBINAISON DE MUTATIONS ET EVENTUELLEMENT  
REPETITION

L15 ANSWER 13 OF 17 PCTFULL COPYRIGHT 2006 Univentio on STN  
TIEN COMPOSITIONS AND METHODS FOR TREATMENT OF MULTIPLE MYELOMA  
TIEN COMPOSITIONS ET PROCEDES DE TRAITEMENT DU MYELOME MULTIPLE

L15 ANSWER 14 OF 17 PCTFULL COPYRIGHT 2006 Univentio on STN  
TIEN TREATMENT OF FUNGAL INFECTIONS WITH POLYENE OR BETA  
GLUCAN SYNTHASE INHIBITOR ANTIFUNGALS COMBINED WITH ANTI HSP90  
ANTIBODIES

TIFR TRAITEMENT DES INFECTIONS FONGIQUES AVEC DES ANTIFONGIQUES A BASE  
D'INHIBITEUR DE SYNTHASE POLYENE OU BETA GLUCANE COMBINES A DES  
ANTICORPS ANTI-HSP90

L15 ANSWER 15 OF 17 PCTFULL COPYRIGHT 2006 Univentio on STN  
TIEN THERAPEUTIC METHODS EMPLOYING DISULFIDE DERIVATIVES OF DITHIOCARBAMATES  
AND COMPOSITIONS USEFUL THEREFOR

TIFR METHODES THERAPEUTIQUES UTILISANT DES DERIVES DE BISULFURE DE  
DITHIOCARBAMATES ET COMPOSITIONS UTILISEES

L15 ANSWER 16 OF 17 PCTFULL COPYRIGHT 2006 Univentio on STN  
TIEN COVALENTLY BOUND 'beta'-GLUCAN CONJUGATES IN  
TARGETED DELIVERY

TIFR CONJUGUES DE 'beta'-GLUCANES LIES PAR COVALENCE UTILISES POUR UNE  
ADMINISTRATION CIBLEE

L15 ANSWER 17 OF 17 PCTFULL COPYRIGHT 2006 Univentio on STN  
TIEN GLUCAN DRUG DELIVERY SYSTEM AND ADJUVANT  
TIEN SYSTEME ET ADJUVANT D'ACHEMINEMENT DE MEDICAMENT A BASE DE GLUCAN

=> d 115 8 16 17 ti abs bib

L15 ANSWER 8 OF 17 PCTFULL COPYRIGHT 2006 Univentio on STN  
TIEN THERAPY-ENHANCING GLUCAN  
TIFR GLUCANE AMELIORANT UNE THERAPIE  
ABEN This invention provides a composition comprising an effective amount of glucan capable of enhancing efficacy of antibodies. This invention further provides the above compositions and a pharmaceutically acceptable carrier. This invention also provides a method for treating a subject with cancer comprising administrating the above-described composition comprising effective amount of glucan capable of enhancing efficacy of vaccines. This invention provides a composition comprising effective amount of glucan capable of enhancing efficacy of vaccines. This invention also provides a method of treating a subject comprising administrating the above pharmaceutical composition to the subject. This invention provides a composition comprising effective amount of glucan capable of enhancing efficacy of natural antibodies. This invention provides a composition comprising effective amount of glucan capable of enhancing host immunity. This invention also provides a composition comprising effective amount of glucan capable of enhancing the action of an agent in preventing tissue rejection.  
ABFR Cette invention porte sur une composition comprenant une quantite efficace de glucane capable de renforcer l'effet des anticorps. Cette invention porte également sur les compositions precipitées et sur un excipient acceptable d'un point de vue pharmaceutique ; sur un procede de traitement d'un sujet atteint d'un cancer consistant a

administrer a ce sujet la composition precitee ; sur une composition comprenant une quantite efficace de glucane capable de renforcer les effets des vaccins ; sur un procede de traitement d'un sujet consistant a administrer la composition pharmaceutique precitee a celui-ci. Cette invention porte egalement sur une composition comprenant une quantite efficace de glucane capable de renforcer l'effet des anticorps naturels ; sur une composition comprenant une quantite efficace de glucane capable de renforcer l'immunité de l'hôte ; sur une composition comprenant une quantite efficace de glucane capable de renforcer l'action d'un agent dans la prevention du rejet des tissus.

AN 2002058711 PCTFULL ED 20020809 EW 200231  
TIEN THERAPY-ENHANCING GLUCAN  
TIFR GLUCANE AMELIORANT UNE THERAPIE  
IN CHEUNG, Nai-Kong, V., 3 Glen Park Road, Purchase, NY 10577, US [US, US]  
PA SLOAN-KETTERING INSTITUTE FOR CANCER RESEARCH, 1275 York Avenue, New York, NY 10021, US [US, US], for all designates States except US;  
CHEUNG, Nai-Kong, V., 3 Glen Park Road, Purchase, NY 10577, US [US, US], for US only  
AG CHAN, Albert, Wai-Kit, Law Offices of Albert Wai-Kit Chan, LLC, World Plaza, Suite 604, 141-07 20th Avenue, Whitestone, NY 11357, US  
LAF English  
LA English  
DT Patent  
PI WO 2002058711 A1 20020801  
DS W: AE AG AL AM AT AU AZ BA BB BG BR BY BZ CA CH CN CO CR CU  
CZ DE DK DM DZ EC EE ES FI GB GD GE GH GM HR HU ID IL IN  
IS JP KE KG KP KR KZ LC LK LR LS LT LU LV MA MD MG MK MN  
MW MX MZ NO NZ PL PT RO RU SD SE SG SI SK SL TJ TM TR TT  
TZ UA UG US UZ VN YU ZA ZW  
RW (ARIPO): GH GM KE LS MW MZ SD SL SZ TZ UG ZM ZW  
RW (EAPO): AM AZ BY KG KZ MD RU TJ TM  
RW (EPO): AT BE CH CY DE DK ES FI FR GB GR IE IT LU MC NL PT SE TR  
RW (OAPI): BF BJ CF CG CI CM GA GN GQ GW ML MR NE SN TD TG  
AI WO 2002-US1276 A 20020115  
PRAI US 2001-60/261,911 20010116  
  
L15 ANSWER 16 OF 17 PCTFULL COPYRIGHT 2006 Univentio on STN  
TIEN COVALENTLY BOUND 'beta'-GLUCAN CONJUGATES IN  
TARGETED DELIVERY  
TIFR CONJUGUES DE 'beta'-GLUCANES LIES PAR COVALENCE UTILISES POUR UNE  
ADMINISTRATION CIBLEE  
ABEN Disclosed herein is a glucan composition containing a 'beta'-1,3-glucan covalently attached to a bioactive agent. The 'beta'-1,3-glucan is attached to the bioactive agent by means of a hydrolyzable covalent linkage to form a glucan/agent complex. Also disclosed are methods relating to the complex of the invention, including a method for the treatment of a pathogen capable of invading or colonizing phagocytic cells, and a method for delivering an antigen to a phagocytic cell.  
ABFR L'invention concerne une composition de glucane contenant un 'beta'-1,3-glucane lie par covalence a un agent bioactif. Le 'beta'-1,3-glucane est lie a l'agent bioactif par une liaison covalente hydrolysable pour former un complexe glucane/agent bioactif. L'invention concerne egalement des procedes relatifs au complexe presente, y compris un procede permettant de traiter un pathogene pouvant envahir ou coloniser des cellules phagocytaires, ainsi qu'un procede permettant d'administrer un antigene a une cellule phagocytaire.  
AN 1996014873 PCTFULL ED 20020514  
TIEN COVALENTLY BOUND 'beta'-GLUCAN CONJUGATES IN

TIFR TARGETED DELIVERY  
CONJUGUES DE 'beta'-GLUCANES LIES PAR COVALENCE UTILISES POUR UNE  
ADMINISTRATION CIBLEE

IN TUSE, Daniel;  
MOHAGHEGHPOUR, Nahid;  
DAWSON, Marcia;  
HOBBS, Peter;  
WINANT, Richard

PA SRI INTERNATIONAL

LA English

DT Patent

PI WO 9614873 A2 19960523

DS W: CA JP AT BE CH DE DK ES FR GB GR IE IT LU MC NL PT SE

AI WO 1995-US14800 A 19951114

PRAI US 1994-8/340,831 19941116

L15 ANSWER 17 OF 17 PCTFULL COPYRIGHT 2006 Univentio on STN  
TIEN GLUCAN DRUG DELIVERY SYSTEM AND ADJUVANT  
TIFR SYSTEME ET ADJUVANT D'ACHEMINEMENT DE MEDICAMENT A BASE DE GLUCAN  
ABEN The invention describes a whole beta-glucan drug  
delivery vehicle that non-specifically  
enhances the immune response, and is safe for human use. A drug is  
incorporated into a whole  
beta-glucan microparticle, and the combination is  
administered to an individual. The beta-glucan  
vehicle allows sustained release of the drug component while  
simultaneously enhancing the  
effectiveness of the drug by boosting the individual's endogenous immune  
response.

ABFR L'invention concerne un vehicule d'acheminement de medicament de  
beta-glucan entier, augmentant  
non specifiquement la reponse immune, et sans danger pour l'homme. On  
incorpore un medicament dans  
une microparticule de beta-glucan entier, puis on  
administre la combinaison a un sujet. Le vehicule  
du beta-glucan permet une liberation soutenue du  
composant medicamenteux, tout en augmentant  
simultanement l'efficacite du medicament en amplifiant la reponse immune  
endogene du sujet.

AN 1990015596 PCTFULL ED 20020513  
TIEN GLUCAN DRUG DELIVERY SYSTEM AND ADJUVANT  
TIFR SYSTEME ET ADJUVANT D'ACHEMINEMENT DE MEDICAMENT A BASE DE GLUCAN  
IN JAMAS, Spiros;  
OSTROFF, Gary, R.;  
EASSON, D., Davidson, Jr.

PA ALPHA BETA TECHNOLOGY;  
JAMAS, Spiros;  
OSTROFF, Gary, R.;  
EASSON, D., Davidson, Jr.

LA English

DT Patent

PI WO 9015596 A1 19901227

DS W: AT AU BB BE BF BG BJ BR CA CF CG CH CM DE DK ES FI FR GA  
GB HU IT JP KP KR LK LU MC MG ML MR MW NL NO RO SD SE SN  
SU TD TG US

AI WO 1990-US3440 A 19900614

PRAI US 1989-366,490 19890615

=> index bioscience  
FILE 'DRUGMONOG' ACCESS NOT AUTHORIZED  
COST IN U.S. DOLLARS

	SINCE FILE	TOTAL
	ENTRY	SESSION
FULL ESTIMATED COST	0.21	0.21

INDEX 'ADISCTI, ADISINSIGHT, ADISNEWS, AGRICOLA, ANABSTR., ANTE, AQUALINE,  
AQUASCI, BIOENG, BIOSIS, BIOTECHABS, BIOTECHDS, BIOTECHNO, CABA, CAPLUS,  
CEABA-VTB, CIN, CONFSCI, CROPB, CROPU, DDFB, DDFU, DGENE, DISSABS, DRUGB,  
DRUGMONOG2, DRUGU, EMBAL, EMBASE, ...' ENTERED AT 13:54:23 ON 03 NOV 2006

68 FILES IN THE FILE LIST IN STNINDEX

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search error messages that display as 0\* with SET DETAIL OFF.

=> s CD20 and (cancer or tumor or neoplastic) and antibody  
23 FILES SEARCHED...  
<-----User Break----->

=> s CD20 and (cancer or tumor or neopla?) and antibody

62	FILE ADISCTI
29	FILE ADISINSIGHT
12	FILE ADISNEWS
2	FILE AGRICOLA
22	FILE BIOENG
1355	FILE BIOSIS
183	FILE BIOTECHABS
183	FILE BIOTECHDS
280	FILE BIOTECHNO
8	FILE CABA
729	FILE CAPLUS
2	FILE CEABA-VTB
22	FILE CIN

21 FILES SEARCHED...  
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4129 FILE DGENE  
9 FILE DISSABS  
459 FILE DRUGU

27 FILES SEARCHED...  
9 FILE EMBAL  
1514 FILE EMBASE  
513 FILE ESBIOWBASE  
318 FILE IFIPAT  
21 FILE IMSDRUGNEWS  
19 FILE IMSRESEARCH  
224 FILE JICST-EPLUS  
58 FILE LIFESCI  
784 FILE MEDLINE  
314 FILE PASCAL

49 FILES SEARCHED...  
20 FILE PHAR  
26 FILE PHARMAML  
35 FILE PHIN  
403 FILE PROMT  
5 FILE PROUSSDDR  
665 FILE SCISEARCH  
749 FILE TOXCENTER  
3182 FILE USPATFULL  
224 FILE USPAT2  
275 FILE WPIDS  
7 FILE WPIFV  
275 FILE WPINDEX

39 FILES HAVE ONE OR MORE ANSWERS, 68 FILES SEARCHED IN STNINDEX

L1 QUE CD20 AND (CANCER OR TUMOR OR NEOPLA?) AND ANTIBODY

=> file embase COST IN U.S. DOLLARS	SINCE FILE ENTRY	TOTAL SESSION
FULL ESTIMATED COST	1.83	2.04

FILE 'EMBASE' ENTERED AT 13:56:25 ON 03 NOV 2006  
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FILE COVERS 1974 TO 3 Nov 2006 (20061103/ED)

EMBASE has been reloaded. Enter HELP RLOAD for details.

EMBASE is now updated daily. SDI frequency remains weekly (default)  
and biweekly.

This file contains CAS Registry Numbers for easy and accurate  
substance identification.

=> s CD20 and (cancer or tumor or neopla?) and antibody

5501 CD20  
886571 CANCER  
671610 TUMOR  
129893 NEOPLA?  
487929 ANTIBODY

L2 1514 CD20 AND (CANCER OR TUMOR OR NEOPLA?) AND ANTIBODY

=> s l2 not py>2001  
2521224 PY>2001  
L3 478 L2 NOT PY>2001

=> s l2 not py>2000  
2973327 PY>2000  
L4 350 L2 NOT PY>2000

=> s l4 and monoclonal  
11 MONOCLONA  
L5 0 L4 AND MONOCLONA

=> s l4 and monoclonal  
168361 MONOCLONAL  
L6 285 L4 AND MONOCLONAL

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TI Radioimmunotherapy of non-Hogkin's lymphoma.

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TI Monoclonal antibodies in chronic lymphocytic leukemia.

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TI Therapeutic uses of MAbs directed against CD20.

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TI Optimizing the use of rituximab for treatment of B-cell non-Hodgkin's  
lymphoma: A benefit-risk update.

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TI Principles of radioimmunotherapy for hematologists and oncologists.
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TI Safety of fludarabine, mitoxantrone, and dexamethasone combined with rituximab in the treatment of stage IV indolent lymphoma.
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TI Chemotherapy sensitization by rituximab: Experimental and clinical evidence.
- L6 ANSWER 8 OF 285 EMBASE COPYRIGHT (c) 2006 Elsevier B.V. All rights reserved on STN  
TI CD20: A gene in search of a function.
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TI Rituximab: An insider's historical perspective.
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TI Current therapeutic paradigm for the treatment of non-Hodgkin's lymphoma.
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TI Therapeutic potential of purine analogue combinations in the treatment of lymphoid malignancies.
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TI Cryofibrinogenemia and skin necrosis in a patient with diffuse large cell lymphoma after high-dose chemotherapy and autologous stem cell transplantation.
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TI [Immunotargeting of tumors: State of the art and prospects in 2000].  
IMMUNOCIBLAGE DES TUMEURS: SITUATION ET PERSPECTIVES EN 2000.
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TI Anti-CD20-and B-cell receptor-mediated apoptosis: Evidence for shared intracellular signaling pathways.
- L6 ANSWER 15 OF 285 EMBASE COPYRIGHT (c) 2006 Elsevier B.V. All rights reserved on STN  
TI The monoclonal antibodies Campath-1H and Rituximab in the therapy of chronic lymphocytic leukemia.
- L6 ANSWER 16 OF 285 EMBASE COPYRIGHT (c) 2006 Elsevier B.V. All rights reserved on STN  
TI Fine characterization of childhood and adult acute lymphoblastic leukemia (ALL) by a proB surrogate light chain-specific mAb and a proposal for a new B cell ALL classification.
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TI Management of orbital lymphoid lesions.
- L6 ANSWER 18 OF 285 EMBASE COPYRIGHT (c) 2006 Elsevier B.V. All rights

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- TI A tetravalent single-chain antibody-streptavidin fusion protein for pretargeted lymphoma therapy.
- L6 ANSWER 19 OF 285 EMBASE COPYRIGHT (c) 2006 Elsevier B.V. All rights reserved on STN
- TI CD10 expression in follicular lymphoma versus reactive follicular hyperplasia: Evaluation in paraffin-embedded tissue.
- L6 ANSWER 20 OF 285 EMBASE COPYRIGHT (c) 2006 Elsevier B.V. All rights reserved on STN
- TI Effect of interferon- $\alpha$  on CD20 antigen expression of B-cell chronic lymphocytic leukemia.
- => d 16 2 3 4 14 15 18 ti abs bib
- L6 ANSWER 2 OF 285 EMBASE COPYRIGHT (c) 2006 Elsevier B.V. All rights reserved on STN
- TI Monoclonal antibodies in chronic lymphocytic leukemia.
- AB For decades, alkylating agents have been the mainstay of treatment of chronic lymphocytic leukemia (CLL), achieving a modest response. Recently, fludarabine has been shown to induce higher and long-lasting responses, and has, in many institutions, replaced the alkylating agents as the first-line agent in the treatment of CLL. However, the goal of achieving higher complete responses that might translate into an improved overall survival in CLL still remains elusive. Antibody-mediated therapy has emerged as an effective modality in the treatment of low-grade B-cell malignancies. Monoclonal antibodies (McAb) against specific lymphocyte markers, including CD52 (Campath-1H) and CD20 (rituximab), are currently being actively studied in the treatment of CLL. Initial results with Campath-1H and rituximab in previously treated and untreated patients with CLL have been promising. We present a review of the current status of McAb and their potential role in the future for the treatment of CLL.
- AN 2002384997 EMBASE
- TI Monoclonal antibodies in chronic lymphocytic leukemia.
- AU Rai K.R.; Gupta N.
- CS K.R. Rai, New Hyde Park, 270-05, 76 Ave, New York, NY 11042, United States. rai@lij.edu
- SO Reviews in Clinical and Experimental Hematology, (2000) Vol. 4, No. 2, pp. 134-144.
- Refs: 36
- ISSN: 1127-0020 CODEN: RCEHFB
- CY United Kingdom
- DT Journal; General Review
- FS 016 Cancer
- 025 Hematology
- 037 Drug Literature Index
- LA English
- SL English
- ED Entered STN: 14 Nov 2002
- Last Updated on STN: 14 Nov 2002
- L6 ANSWER 3 OF 285 EMBASE COPYRIGHT (c) 2006 Elsevier B.V. All rights reserved on STN
- TI Therapeutic uses of MAbs directed against CD20.
- AB Background: There are two main classes of Abs directed against the CD20 Ag that have been developed for therapeutic intent: Unconjugated and radiolabeled Absolute Methods: The clinical results available from the large clinical trials utilizing both the unconjugated and radiolabelled Abs are summarized in this article. Discussion: Both of these classes of agents have shown promise in clinical trials both alone and in conjunction with conventional chemotherapy or high-dose

chemotherapy and transplantation. Ongoing research with these agents will provide further evidence of the place in clinical practice for these agents.

AN 2001089082 EMBASE  
TI Therapeutic uses of MAbs directed against CD20.  
AU Vose J.M.  
CS Prof. J.M. Vose, University of Nebraska, Medical Center, 987680 Nebraska Medical Center, Omaha, NE 68198-7680, United States  
SO Cytotherapy, (2000) Vol. 2, No. 6, pp. 455-461.  
Refs: 36  
ISSN: 1465-3249 CODEN: CYTRF3  
CY United Kingdom  
DT Journal; General Review  
FS 026 Immunology, Serology and Transplantation  
037 Drug Literature Index  
030 Pharmacology  
016 Cancer  
025 Hematology  
038 Adverse Reactions Titles  
023 Nuclear Medicine  
LA English  
SL English  
ED Entered STN: 22 Mar 2001  
Last Updated on STN: 22 Mar 2001

L6 ANSWER 4 OF 285 EMBASE COPYRIGHT (c) 2006 Elsevier B.V. All rights reserved on STN  
TI Optimizing the use of rituximab for treatment of B-cell non-Hodgkin's lymphoma: A benefit-risk update.  
AB Rituximab (Rituxan; Genentech, Inc, South San Francisco, CA and IDEC Pharmaceutical Corporation, San Diego, CA), the first monoclonal antibody approved in the United States for the treatment of cancer, is indicated for the treatment of patients with relapsed or refractory CD20+ low-grade non-Hodgkin's lymphoma. From November 1997 through May 1999, approximately 36,000 patients have been treated with rituximab. Serious cardiopulmonary infusion reactions culminating in death have been reported to occur in approximately 0.04% to 0.07% of patients. Post-approval tumor lysis syndrome has been reported within 12 to 24 hours after the first antibody infusion and is estimated to occur in 0.04% to 0.05% of patients. The risk of tumor lysis appears to be higher in patients with high numbers of circulating malignant cells. Serious infusion-related adverse drug reactions, most often consisting of cardiopulmonary reactions associated with the rapid lysis of large numbers of circulating malignant cells, have been fatal in approximately 0.5 per 1,000 treated patients. Major risk factors include high numbers of circulating malignant lymphoma cells, pulmonary infiltrates or lymphoma involvement, and prior cardiovascular disease. This report updates the safety experience of rituximab therapy with data from clinical trials and postmarketing safety experience, and examines how this information can be used to optimize therapy. Copyright .COPYRGT. 2000 by W.B. Saunders Company.

AN 2001074544 EMBASE  
TI Optimizing the use of rituximab for treatment of B-cell non-Hodgkin's lymphoma: A benefit-risk update.  
AU Kunkel L.; Wong A.; Maneatis T.; Nickas J.; Brown T.; Grillo-Lopez A.; Benyunes M.; Grobman B.; Dillman R.O.  
CS Dr. M. Benyunes, Oncology Center, Genentech BioOncology, Mailstop No. 59, 1 DNA Way, South San Francisco, CA 94080-4990, United States  
SO Seminars in Oncology, (2000) Vol. 27, No. 6 SUPPL. 12, pp. 53-61.  
Refs: 18  
ISSN: 0093-7754 CODEN: SOLGAV  
CY United States  
DT Journal; Conference Article  
FS 016 Cancer

025      Hematology  
026      Immunology, Serology and Transplantation  
037      Drug Literature Index  
038      Adverse Reactions Titles

LA      English  
SL      English  
ED      Entered STN: 8 Mar 2001  
Last Updated on STN: 8 Mar 2001

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TI      Anti-CD20-and B-cell receptor-mediated apoptosis: Evidence for shared intracellular signaling pathways.

AB      Clinical administration of the anti-CD20 antibody IDEC-C2B8 can induce remission of low-grade B-cell lymphoma. Whereas it has been suggested that the main mechanisms of action are complement-mediated and antibody-dependent cell-mediated cytotoxicity, we demonstrate that monoclonal antibody IDEC-C2B8 is a strong inducer of apoptosis in CD20-positive B-cell lymphoma cell lines reflecting different stages of lymphomagenesis. Thus, CD20-dependent apoptosis was inducible in human surface IgM-positive Burkitt's lymphoma cell lines as well as in more mature surface IgM-negative B-cell lymphoma cell lines carrying the t(14;18) translocation. Furthermore, in Burkitt's lymphoma cell lines, we observed a striking correlation between anti-CD20- and B-cell receptor-mediated apoptosis with regard to sensitivity toward the apoptotic stimuli and the execution of the apoptotic pathway. Thus, induction of anti-CD20- or B-cell receptor-mediated apoptosis involved rapid up-regulation of the proapoptotic protein Bax. In addition, we show similar changes in the mRNA expression level of two early response genes, c-myc and Berg36, as well as activation of the mitogen-activated protein kinase family members p44 (extracellular signal-regulated kinase 1) and p42 (extracellular signal-regulated kinase 2) and activation of activator protein 1 (AP-1) DNA binding activity. These data support our hypothesis that both pathways are mediated in part by the same signal-transducing molecules. These results might help explain the resistance and regression of lymphomas to IDEC-C2B8 and give new insights in the signaling cascade after CD20 ligation.

AN      2001028805 EMBASE

TI      Anti-CD20-and B-cell receptor-mediated apoptosis: Evidence for shared intracellular signaling pathways.

AU      Mathas S.; Rickers A.; Bommert K.; Dorken B.; Mapara M.Y.  
CS      S. Mathas, Max-Delbrück-Center Molecular Méd., FG Dorken, D-13125 Berlin, Germany

SO      Cancer Research, (15 Dec 2000) Vol. 60, No. 24, pp. 7170-7176. .  
Refs: 51  
ISSN: 0008-5472 CODEN: CNREA8

CY      United States  
DT      Journal; Article  
FS      016      Cancer  
      022      Human Genetics  
      025      Hematology  
      029      Clinical Biochemistry

LA      English  
SL      English  
ED      Entered STN: 1 Feb 2001  
Last Updated on STN: 1 Feb 2001

L6      ANSWER 15 OF 285 EMBASE COPYRIGHT (c) 2006 Elsevier B.V. All rights reserved on STN

TI      The monoclonal antibodies Campath-1H and Rituximab in the therapy of chronic lymphocytic leukemia.

AB      The treatment options for chronic lymphocytic leukemia (CLL) beside standard therapy with chlorambucil or other alkylating agents have

dramatically increased in the last few years. Promising results have been reported with new cytotoxic agents such as the purine analogues fludarabine and 2-chlorodeoxyadenosine, either at first diagnosis or at relapse. Nevertheless, all patients with CLL relapse after initial response. Since residual lymphoma cells are very likely to be the origin of the clinical relapse, there is a need for new therapeutic approaches with different mechanism of action to eliminate these residual cells. These approaches include allogeneic or autologous stem cell transplantation as well as immunotherapeutic strategies. Monoclonal antibodies, either alone or conjugated to toxins or radioisotopes, are thus being actively investigated. In clinical trials the genetically engineered chimeric unconjugated anti-CD20 antibody Rituximab and the humanized unconjugated anti-CD52 antibody Campath-1H achieved the most promising results in the treatment of patients with relapsed or refractory low-grade non-Hodgkin's lymphoma. Thus far there is only little clinical experience with Rituximab in patients with CLL, and the exact role of these agent in the treatment of CLL has still to be determined in ongoing and future trials. As a single agent Campath-1H showed more clinical activity in previously treated CLL patients than Rituximab, with response rates of up to 33% in a multicenter pivotal study. Furthermore, the potential risks of tumor lysis and anaphylaxis for both antibodies and immunosuppression particularly for Campath-1H must be taken into account. The present review will compare the development and the basic principles of these unconjugated monoclonal antibodies and consider their present and potential role in the treatment of patients with CLL.

AN 2001019062 EMBASE  
TI The monoclonal antibodies Campath-1H and Rituximab in the therapy of chronic lymphocytic leukemia.  
AU Schulz H.; Winkler U.; Staak J.O.; Engert A.  
CS Dr. H. Schulz, Klinik I fur Innere Medizin, Universitat zu Koln, Joseph-Stelzmann-Strasse 9, D-50924 Koln, Germany. Holger.Schulz@uni-koeln.de  
SO Onkologie, (2000) Vol. 23, No. 6, pp. 526-532. .  
Refs: 38  
ISSN: 0378-584X CODEN: ONKOD2  
CY Germany  
DT Journal; General Review  
FS 016 Cancer  
025 Hematology  
037 Drug Literature Index  
038 Adverse Reactions Titles  
LA English  
SL English; German  
ED Entered STN: 1 Feb 2001  
Last Updated on STN: 1 Feb 2001

L6 ANSWER 18 OF 285 EMBASE COPYRIGHT (c) 2006 Elsevier B.V. All rights reserved on STN  
TI A tetravalent single-chain antibody-streptavidin fusion protein for pretargeted lymphoma therapy.  
AB Single-chain Fv antibody fragments from the CD20-specific murine monoclonal antibody B9E9 were genetically engineered as streptavidin fusions [single-chain Fv-streptavidin (scFvSA) fusion protein] for use in pretargeted radioimmunotherapy. The scFvSA constructs were expressed as soluble, tetrameric species in the periplasm of *Escherichia coli*. Expression levels were affected by the order of the variable regions and the length and composition of the single-chain Fv linker. The best expressor was obtained with the variable regions in the heavy chain-light chain configuration separated by a 25-mer Gly4Ser linker. This construct produced 250-300 mg of soluble, tetrameric fusion protein per liter of fermentor culture. The fusion protein (M(r) 173,600) was purified from crude lysates by iminobiotin affinity chromatography with an overall yield

of about 50% and was analyzed for functionality both in vitro and in vivo. Immunoreactivity of the scFvSA fusion protein and its nanomolar affinity to CD20-positive Ramos cells were comparable with the B9E9 monoclonal antibody. The fusion protein had a biotin dissociation rate identical to recombinant streptavidin and bound an average of 3.6 biotins/molecule of a possible 4 biotins/molecule. Labeled fusion protein cleared from the blood of BALB/c mice with a  $\beta$  half-life of about 16 h. In nude mice bearing Ramos xenografts, the fusion protein demonstrated sufficient tumor localization of functional streptavidin to enable efficient, tumor-specific targeting of a subsequently administered radionuclide-chelate/biotin molecule. These results suggest that large quantities of functional scFvSA can be produced for clinical testing as a therapy for non-Hodgkin's lymphoma.

AN 2000426562 EMBASE  
TI A tetravalent single-chain antibody-streptavidin fusion protein for pretargeted lymphoma therapy.  
AU Schultz J.; Lin Y.; Sanderson J.; Zuo Y.; Stone D.; Mallett R.; Wilbert S.; Axworthy D.  
CS J. Schultz, NeoRx Corporation, Molecular Biology Research, 410 West Harrison Street, Seattle, WA 98119-4007, United States  
SO Cancer Research, (1 Dec. 2000) Vol. 60, No. 23, pp. 6663-6669.  
Refs: 35  
ISSN: 0008-5472 CODEN: CNREAS  
CY United States  
DT Journal; Article  
FS 016 Cancer  
LA English  
SL English  
ED Entered STN: 21 Dec 2000  
Last Updated on STN: 21 Dec 2000

=> s CD22 and (cancer or tumor or neopla?) and antibody

1333 CD22  
886571 CANCER  
671610 TUMOR  
129893 NEOPLA?  
487929 ANTIBODY

L7 285 CD22 AND (CANCER OR TUMOR OR NEOPLA?) AND ANTIBODY

=> s 17 not py>2000  
2973327 PY>2000  
L8 111 L7 NOT PY>2000

=> s 18 and monoclonal  
168361 MONOCLONAL  
L9 94 L8 AND MONOCLONAL

=> d 19 1-20 ti

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TI Radioimmunotherapy of non-Hodgkin's lymphoma.

L9 ANSWER 2 OF 94 EMBASE COPYRIGHT (c) 2006 Elsevier B.V. All rights reserved on STN  
TI Relationship of the CD22 immunotoxin dose and the tumour establishment in a SCID mice model.

L9 ANSWER 3 OF 94 EMBASE COPYRIGHT (c) 2006 Elsevier B.V. All rights reserved on STN  
TI Long-term results of total therapy studies 11, 12 and 13A for childhood acute lymphoblastic leukemia at St Jude Children's research hospital.

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TI Fine characterization of childhood and adult acute lymphoblastic leukemia (ALL) by a proB surrogate light chain-specific mAb and a proposal for a new B cell ALL classification.
- L9 ANSWER 5 OF 94 EMBASE COPYRIGHT (c) 2006 Elsevier B.V. All rights reserved on STN  
TI Radioimmunotherapy in the  $\pi$ -BCL(1) B cell lymphoma model: Efficacy depends on more than targeted irradiation alone.
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TI Monoclonal antibody-based therapy of lymphoid neoplasms: What's on the horizon?
- L9 ANSWER 7 OF 94 EMBASE COPYRIGHT (c) 2006 Elsevier B.V. All rights reserved on STN  
TI Monoclonal antibodies in lymphoid neoplasia: Principles for optimal combined therapy.
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TI Physics for practitioners: The use of radiolabeled monoclonal antibodies in B-cell non-Hodgkin's lymphoma.
- L9 ANSWER 9 OF 94 EMBASE COPYRIGHT (c) 2006 Elsevier B.V. All rights reserved on STN  
TI [Mechanisms of action of monoclonal antibodies: Applications in the treatment of lymphoproliferative syndromes of phenotype B]. MECANISMES D'ACTION DES ANTICORPS MONOCLONAUX. APPLICATIONS AU TRAITEMENT DES SYNDROMES LYMPHOPROLIFERATIFS DE PHENOTYPE B.
- L9 ANSWER 10 OF 94 EMBASE COPYRIGHT (c) 2006 Elsevier B.V. All rights reserved on STN  
TI Reduction of chemokine levels and leukocyte traffic to joints by tumor necrosis factor  $\alpha$  blockade in patients with rheumatoid arthritis.
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TI Immunotoxins against CD19 and CD22 are effective in killing precursor-B acute lymphoblastic leukemia cells in vitro.
- L9 ANSWER 12 OF 94 EMBASE COPYRIGHT (c) 2006 Elsevier B.V. All rights reserved on STN  
TI Cytotoxic activity of disulfide-stabilized recombinant immunotoxin RFB4(dsFv)-PE38 (BL22) toward fresh malignant cells from patients with B-cell leukemias.
- L9 ANSWER 13 OF 94 EMBASE COPYRIGHT (c) 2006 Elsevier B.V. All rights reserved on STN  
TI A phase I study of combination therapy with immunotoxins IgG-HD37-deglycosylated ricin A chain (dgA) and IgG-RFB4-dgA (Combotox) in patients with refractory CD19(+), CD22(+) B cell lymphoma.
- L9 ANSWER 14 OF 94 EMBASE COPYRIGHT (c) 2006 Elsevier B.V. All rights reserved on STN  
TI Chronic lymphoproliferative disorders: An integrated point of view for the differential diagnosis.
- L9 ANSWER 15 OF 94 EMBASE COPYRIGHT (c) 2006 Elsevier B.V. All rights reserved on STN

TI [Lymphomas' treatment with monoclonal antibodies].  
TRATAMIENTO DE LOS LINFOMAS CON ANTICUERPOS MONOCOLANALES.

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TI Low- versus high-dose radioimmunotherapy with humanized anti-CD22 or chimeric anti-CD20 antibodies in a broad spectrum of B cell-associated malignancies.

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TI Pharmacokinetics, dosimetry, and initial therapeutic results with  $^{131}\text{I}$ - and  $^{111}\text{In}/^{90}\text{Y}$ -labeled humanized LL2 anti-CD22 monoclonal antibody in patients with relapsed, refractory non-Hodgkin's lymphoma.

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TI The effects of domain deletion, glycosylation, and long IgG3 hinge on the biodistribution and serum stability properties of a humanized IgG1 immunoglobulin, hLL2, and its fragments.

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TI Targeting human cancer xenografts with monoclonal antibodies labeled using radioiodinated, diethylenetriaminepentaacetic acid-appended peptides.

L9 ANSWER 20 OF 94 EMBASE COPYRIGHT (c) 2006 Elsevier B.V. All rights reserved on STN

TI Antibody-targeted therapy for low-grade lymphoma.

=> d 19 6 7 11 16 17 19 20 ti abs bib

L9 ANSWER 6 OF 94 EMBASE COPYRIGHT (c) 2006 Elsevier B.V. All rights reserved on STN

TI Monoclonal antibody-based therapy of lymphoid neoplasms: What's on the horizon?

AB Although exciting advances in monoclonal antibody therapy have already occurred, a review of agents in earlier stages of development reveals that many new agents may be approaching the clinic in the years to come. A look at the horizon of monoclonal antibody therapy reveals the following: novel strategies for augmenting the efficacy of monoclonal antibodies with which many clinicians are already familiar; novel antibodies with activity against lymphoma cells; novel technologies for generating and humanizing monoclonal antibodies; novel types of antibody-based therapeutics; and novel uses for these agents as modulators of the host immune system or other aspects of host-tumor interaction. Research in each of these areas will be reviewed. (C) 2000 by W.B. Saunders Company.

AN 2000373217 EMBASE

TI Monoclonal antibody-based therapy of lymphoid neoplasms: What's on the horizon?

AU Davis T.A.

CS Dr. T.A. Davis, National Cancer Institute, EPN 7000, 6130 Executive Blvd., Rockville, MD 20852, United States

SO Seminars in Hematology, (2000) Vol. 37, No. 4 SUPPL. 7, pp. 34-42. .

Refs: 74

ISSN: 0037-1963 CODEN: SEHEA3

CY United States

DT Journal; Conference Article

FS 016 Cancer

025      Hematology  
026      Immunology, Serology and Transplantation  
037      Drug Literature Index

LA      English  
SL      English  
ED      Entered STN: 16 Nov 2000  
Last Updated on STN: 16 Nov 2000

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TI      Monoclonal antibodies in lymphoid neoplasia:  
Principles for optimal combined therapy.

AB      Rituximab and other monoclonal antibody therapies now in development have the potential to markedly impact the treatment of non-Hodgkin's lymphoma (NHL). These agents have significant single-agent activity, distinct mechanisms of action, and, in the case of rituximab and other unconjugated antibodies, favorable toxicity profiles that are nonoverlapping with the adverse effects associated with conventional chemotherapy. These properties may allow for the use of novel combination therapies with enhanced outcomes for patients. Systematic evaluation of rationally designed combinations through randomized, prospective trials is required to determine the clinical utility of these novel agents and combinations will live up to their potential. (C) 2000 by W.B. Saunders Company.

AN      2000373215    EMBASE

TI      Monoclonal antibodies in lymphoid neoplasia:  
Principles for optimal combined therapy.

AU      Maloney D.G.

CS      Dr. D.G. Maloney, Fred Hutchinson Can. Research Center, 1124 Columbia St, Seattle, WA 98104, United States

SO      Seminars in Hematology, (2000) Vol. 37, No. 4 SUPPL. 7, pp. 17-26. .  
Refs: 78  
ISSN: 0037-1963    CODEN: SEHEA3

CY      United States

DT      Journal; Conference Article

FS      016      Cancer  
025      Hematology  
026      Immunology, Serology and Transplantation  
037      Drug Literature Index  
038      Adverse Reactions Titles

LA      English  
SL      English  
ED      Entered STN: 16 Nov 2000  
Last Updated on STN: 16 Nov 2000

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TI      Immunotoxins against CD19 and CD22 are effective in killing precursor-B acute lymphoblastic leukemia cells in vitro.

AB      Monoclonal antibodies (Mabs) conjugated to toxins or their subunits (immunotoxins or ITs) are undergoing clinical testing in adults with a variety of malignancies. The potential impact of this form of therapy in pediatric precursor B-lineage acute lymphoblastic leukemia (pre-B ALL) has yet to be determined. Mabs directed against the cell surface antigens, CD19 and CD22 conjugated to deglycosylated ricin A chain (dgRTA) have been tested in patients with non-Hodgkin's lymphoma (NHL), but not in patients with pre-B ALL. Because of the encouraging performance of these ITs in phase I trials, we evaluated the specific cytotoxicity of anti-CD19 (HD37-dgRTA) and anti-CD22 (RFB4-dgRTA) ITs or their combination (Combotox) on patient-derived pre-B ALL cells maintained in vitro on a stromal feeder layer. After 48 h in culture, cytotoxicity to tumor cells was determined by flow cytometry using propidium iodide (PI) and fluorescein isothiocyanate (FITC)-conjugated anti-CD10, 19, and 22. Both RFB4-dgRTA and HD37-dgRTA

induced a statistically significant reduction in the number of viable leukemic cells, and Combotox was even more effective. Our results demonstrate that these ITs are specifically cytotoxic to primary pre-B ALL cells and that they should be further evaluated for the therapy of B-lineage ALL.

AN 2000155159 EMBASE  
TI Immunotoxins against CD19 and CD22 are effective in killing precursor-B acute lymphoblastic leukemia cells in vitro.  
AU Herrera L.; Farah R.A.; Pellegrini V.A.; Aquino D.B.; Sandler E.S.; Buchanan G.R.; Vitetta E.S.  
CS L. Herrera, Cancer Immunobiology Center, University of Texas, Southwestern Med. Center, 6000 Harry Hines Blvd, Dallas, TX 75235-8576, United States  
SO Leukemia, (2000) Vol. 14, No. 5, pp. 853-858.  
Refs: 30  
ISSN: 0887-6924 CODEN: LEUKED  
CY United Kingdom  
DT Journal; Article  
FS 016 Cancer  
025 Hematology  
026 Immunology, Serology and Transplantation  
030 Pharmacology  
037 Drug Literature Index  
LA English  
SL English  
ED Entered STN: 18 May 2000  
Last Updated on STN: 18 May 2000

L9 ANSWER 16 OF 94 EMBASE COPYRIGHT (c) 2006 Elsevier B.V. All rights reserved on STN  
TI Low- versus high-dose radioimmunotherapy with humanized anti-CD22 or chimeric anti-CD20 antibodies in a broad spectrum of B cell-associated malignancies.  
AB Both CD22 and CD20 have been used successfully as target molecules for radioimmunotherapy (RAIT) of low-grade B cell non-Hodgkin's lymphoma. Because both CD20 and CD22 are highly expressed relatively early in the course of B cell maturation, and because its expression is maintained up to relatively mature stages, we studied the potential of the humanized anti-CD22 antibody, hLL2, as well as of the chimeric anti-CD20 (chCD20) antibody, rituximab (IDE-C2B8), for low- or high-dose (myeloablative) RAIT of a broad range of B cell-associated hematological malignancies. A total of 10 patients with chemorefractory malignant neoplasms of B cell origin were studied with diagnostic ( $n = 5$ ) and/or potentially therapeutic doses ( $n = 9$ ) of hLL2 ( $n = 4$ ; 0.5 mg/kg, 8-315 mCi of  $^{131}\text{I}$ ) or chCD20 ( $n = 5$ ; 2.5 mg/kg, 15-495 mCi of  $^{131}\text{I}$ ). The diagnostic doses were given to establish the patients' eligibility for RAIT and to estimate the individual radiation dosimetry. One patient suffered of Waldenstrom's macroglobulinemia, eight patients had low ( $n = 4$ ), intermediate- ( $n = 2$ ) or high- ( $n = 2$ ) grade non-Hodgkin's lymphoma, and one patient had a chemorefractory acute lymphatic leukemia, after having failed five heterologous bone marrow or stem cell transplantations. Three of these 10 patients were scheduled for treatment with conventional (30-63 mCi, cumulated doses of up to 90 mCi of  $^{131}\text{I}$ ) and 7 with potentially myeloablative (225-495 mCi of  $^{131}\text{I}$ ) activities of  $^{131}\text{I}$ -labeled hLL2 or chCD20 (0.5 and 2.5 mg/kg, respectively); homologous ( $n = 6$ ) or heterologous ( $n = 1$ ) stem cell support was provided in these cases. Good tumor targeting was observed in all diagnostic as well as posttherapeutic scans of all patients. In myeloablative therapies, the therapeutic activities were calculated based on the diagnostic radiation dosimetry, aiming at lung and kidney doses  $\leq 20\text{Gy}$ . Stem cells were reinfused when the whole-body activity retention fell below 20 mCi. In eight assessable patients, five had complete remissions, two experienced partial remissions (corresponding to an overall response rate of 87%), and one (low-dose) patient had progressive disease despite therapy. In the

five assessable, actually stem-cell grafted patients, the complete response rate was 100%. Both CD20 and CD22 seem to be suitable target molecules for high-dose RAIT in a broad spectrum of hematological malignancies of B cell origin with a broad range of maturation stages (from acute lymphatic leukemia to Waldenstrom's macroglobulinemia). The better therapeutic outcome of patients undergoing high-dose, myeloablative RAIT favors this treatment concept over conventional, low-dose regimens.

AN 1999367297 EMBASE  
TI Low- versus high-dose radioimmunotherapy with humanized anti-CD22 or chimeric anti-CD20 antibodies in a broad spectrum of B cell-associated malignancies.  
AU Behr T.M.; Wormann B.; Gramatzki M.; Riggert J.; Gratz S.; Behe M.; Griesinger F.; Sharkey R.M.; Kolb H.-J.; Hiddemann W.; Goldenberg D.M.; Becker W.  
CS T.M. Behr, Department of Nuclear Medicine, Georg-August-University of Gottingen, Robert-Koch-Strasse 40, D-37075 Gottingen, Germany.  
tmbehr@med.uni-goettingen.de  
SO Clinical Cancer Research, (1999) Vol. 5, No. 10 SUPPL., pp. 3304s-3314s.  
Refs: 24  
ISSN: 1078-0432 CODEN: CCREF4  
CY United States  
DT Journal; Conference Article  
FS 016 Cancer  
025 Hematology  
026 Immunology, Serology and Transplantation  
037 Drug Literature Index  
038 Adverse Reactions Titles  
LA English  
SL English  
ED Entered STN: 12 Nov 1999  
Last Updated on STN: 12 Nov 1999

L9 ANSWER 17 OF 94 EMBASE COPYRIGHT (c) 2006 Elsevier B.V. All rights reserved on STN  
TI Pharmacokinetics, dosimetry, and initial therapeutic results with 131I- and 111In-/90Y-labeled humanized LL2 anti-CD22 monoclonal antibody in patients with relapsed, refractory non-Hodgkin's lymphoma.  
AB The pharmacokinetics, dosimetry, and immunogenicity of 131I- and 111In-/90Y-humanized LL2 (hLL2) anti-CD22 monoclonal antibodies were determined in patients with recurrent non-Hodgkin's lymphoma. Fourteen patients received tracer doses of 131I-hLL2 followed 1 week later by therapeutic doses intended to deliver 50-100 cGy to the bone marrow. Another eight patients received 111In-hLL2 followed by therapy with 90Y-hLL2 also delivering 50 or 100 cGy to the bone marrow. The blood T<sub>1/2</sub> (hours) for the tracer infusions of 131I-hLL2 was 44.2 ± 10.9 (mean ± SD) compared with 54.2 ± 25.0 for the therapy infusions, whereas the values were 70.7 ± 17.6 for 111In-hLL2 and 65.8 ± 15.0 for 90Y-hLL2. The estimated average radiation dose from 131I-hLL2 in tumors >3 cm was 2.4 ± 1.9 cGy/mCi and was only 0.9-, 1.0-, 1.1-, and 1.0-fold that of the bone marrow, lung, liver, and kidney, respectively. In contrast, the estimated average radiation dose from 90Y-hLL2 in tumors >3 cm was 21.5 ± 10.0 cGy/mCi and was 3.7-, 2.5-, 1.8-, and 2.5-fold that of the bone marrow, lung, liver, and kidney, respectively. No evidence of significant anti-hLL2 antibodies was seen in any of the patients. Myelosuppression was the only dose-limiting toxicity and was greater in patients who had prior high-dose chemotherapy. Objective tumor responses were seen in 2 of 13 and 2 of 7 patients given 131I-hLL2 or 90Y-hLL2, respectively. In conclusion, 90Y-hLL2 results in a more favorable tumor dosimetry compared with 131I-hLL2. This finding, combined with the initial anti-tumor effects observed, encourage further studies of this agent in therapeutic trials.

AN 1999367296 EMBASE  
TI Pharmacokinetics, dosimetry, and initial therapeutic results with 131I-

and  $^{111}\text{In}$ -/ $^{90}\text{Y}$ -labeled humanized LL2 anti-CD22 monoclonal antibody in patients with relapsed, refractory non-Hodgkin's lymphoma.

AU Juweid M.E.; Stadtmauer E.; Hajjar G.; Sharkey R.M.; Suleiman S.; Luger S.; Swayne L.C.; Alavi A.; Goldenberg D.M.

CS M.E. Juweid, Garden State Cancer Center, 520 Belleville Avenue, Belleville, NJ 07109, United States. gscancer@att.net

SO Clinical Cancer Research, (1999) Vol. 5, No. 10 SUPPL., pp. 3292s-3303s. .

Refs: 25  
ISSN: 1078-0432 CODEN: CCREF4

CY United States

DT Journal; Conference Article

FS 016      Cancer  
      025      Hematology  
      026      Immunology, Serology and Transplantation  
      037      Drug Literature Index  
      038      Adverse Reactions Titles

LA English

SL English

ED Entered STN: 12 Nov 1999  
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L9 ANSWER 19 OF 94 EMBASE COPYRIGHT (c) 2006 Elsevier B.V. All rights reserved on STN

TI Targeting human cancer xenografts with monoclonal antibodies labeled using radioiodinated, diethylenetriaminepentaacetic acid-appended peptides.

AB A new nonmetabolizable peptide approach to the production of residualizing radioiodine was evaluated in nude mice bearing xenografts of human lung adenocarcinoma (Calu-3) and B-cell lymphoma (Ramos). Monoclonal antibodies (MAbs) RS7 (anti-epithelial glycoprotein-1) and LL2 (anti-CD22) were radioiodinated using the thiol-reactive diethylenetriaminepentaacetic acid-D-peptide adducts IMP-R1 and IMP-R2.  $^{125}\text{I}$ -IMP-R1- and  $^{125}\text{I}$ -IMP-R2- labeled MAbs were compared to the MAbs iodinated by the conventional chloramine-T approach,  $^{111}\text{In}$ , and  $^{131}\text{I}$  dilactitoltyramine (DLT). In vivo biodistribution studies demonstrated a significant improvement in the tumor accretion of radiolabel using the  $^{125}\text{I}$ -IMP-R1 labeled MAbs compared with the conventionally iodinated antibodies. For example, at day 7, the percentage of injected dose per gram of tissue in Calu-3 was  $7.9 \pm 4.1\%$  and  $18.1 \pm 7.9\%$  ( $P < 0.05$ ) for the conventional  $^{131}\text{I}$ - and  $^{125}\text{I}$ -IMP-R1-RS7, respectively, and tumor:nontumor ratios were 2.6-4.5-fold higher with the  $^{125}\text{I}$ -IMP-R1-RS7. It is estimated that  $^{131}\text{I}$ IMP-R1-RS7 would deliver a dose to tumor (at the estimated maximum tolerated dose) 3.9 times greater than conventional  $^{131}\text{I}$ -labeled RS7, 1.4 times greater than  $^{90}\text{Y}$ -labeled RS7, and 0.7 times that of  $^{131}\text{I}$ -DLT-labeled RS7. Tumor accretion of  $^{125}\text{I}$ -IMP-R2-RS7 was also improved compared with conventionally iodinated antibody. However, this label also caused a large increase in kidney accretion. Similar improvements in tumor accretion and tumor:nontumor ratios were observed when  $^{125}\text{I}$ -IMP-R1-LL2 was used in the Ramos model. IMP-R1 offers a practical and useful residualizing radioiodine label because labeling efficiency is at least 10 times greater than that of the residualizing label DLT, without MAb aggregation. Structural modifications can be envisioned for further improvements in radioiodine incorporation, specific activity, and tumor dosimetry, and efforts along these lines are under way.

AN 1999367265 EMBASE

TI Targeting human cancer xenografts with monoclonal antibodies labeled using radioiodinated, diethylenetriaminepentaacetic acid-appended peptides.

AU Stein R.; Govindan S.V.; Mattes M.J.; Shih L.B.; Griffiths G.L.; Hansen H.J.; Goldenberg D.M.

CS R. Stein, Garden State Cancer Center, 520 Belleville Avenue, Belleville,

NJ 07109, United States  
SO Clinical Cancer Research, (1999) Vol. 5, No. 10 SUPPL., pp. 3079s-3087s.  
Refs: 24  
ISSN: 1078-0432 CODEN: CCREF4  
CY United States  
DT Journal; Conference Article  
FS 016 Cancer  
023 Nuclear Medicine  
026 Immunology, Serology and Transplantation  
037 Drug Literature Index  
LA English  
SL English  
ED Entered STN: 12 Nov 1999  
Last Updated on STN: 12 Nov 1999

L9 ANSWER 20 OF 94 EMBASE COPYRIGHT (c) 2006 Elsevier B.V. All rights reserved on STN

TI Antibody-targeted therapy for low-grade lymphoma.  
AB Monoclonal antibodies (MoAbs) have now become a successful treatment for selected patients with non-Hodgkin's lymphoma (NHL). Antibody targets most commonly used for the treatment of B-cell NHL include CD20, CD19, and CD22. Unconjugated MoAbs are cytotoxic by several mechanisms, including complement-dependent cytotoxicity (CDC), antibody-dependent cell-mediated cytotoxicity (ADCC), and signal transduction leading to apoptosis. In an attempt to augment the effectiveness of naked antibody preparations, various radioconjugates, immunotoxins, chemotherapeutic agents, or immune-modifiers have been attached to the antibodies. The immunotoxin tested most extensively in clinical trials is B4-blocked ricin (anti-CD19 with a partially blocked ricin toxin). The use of radioimmunoconjugates to augment the effectiveness of unlabeled antibodies has been one of the most popular strategies. Antibodies against these targets have now been chelated with radioconjugates such as 131I or 90Y and tested in recent clinical trials. Radioimmunotherapy has the theoretical advantage over naked antibody therapy or immunotoxin therapy in that the MoAb conjugated with a radioisotope can have a 'cross-fire' effect such that antigen-negative tumor cells adjacent to those expressing the target antigen may also be killed. This may enhance the likelihood of tumor sterilization even in fairly bulky disease. Future studies will focus on testing these antibodies in larger patient populations, sequentially or in combination, and on combining MoAb therapy with standard- or high-dose chemotherapy and hematopoietic stem-cell transplantation.

AN 1999364400 EMBASE  
TI Antibody-targeted therapy for low-grade lymphoma.  
AU Vose J.M.  
CS Dr. J.M. Vose, Univ. of Nebraska Medical Center, 983332 Nebraska Medical Center, Omaha, NE 68198-3332, United States  
SO Seminars in Hematology, (1999) Vol. 36, No. 4 SUPPL. 6, pp. 15-20.  
Refs: 29  
ISSN: 0037-1963 CODEN: SEHEA3  
CY United States  
DT Journal; Conference Article  
FS 016 Cancer  
025 Hematology  
026 Immunology, Serology and Transplantation  
037 Drug Literature Index  
LA English  
SL English  
ED Entered STN: 4 Nov 1999  
Last Updated on STN: 4 Nov 1999

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6078 CD25  
886571 CANCER  
671610 TUMOR  
129893 NEOPLA?  
168361 MONOCLONAL  
487929 ANTIBODY  
L10 292 CD25 AND (CANCER OR TUMOR OR NEOPLA?) AND MONOCLONAL AND ANTIBOD  
Y

=> s l10 not py>2000  
2973327 PY>2000  
L11 135. L10 NOT PY>2000

=> d l11 1-20 ti

L11 ANSWER 1 OF 135 EMBASE COPYRIGHT (c) 2006 Elsevier B.V. All rights reserved on STN  
TI IL-2R $\alpha$ -directed monoclonal antibodies provide effective therapy in a murine model of adult T-cell leukemia by a mechanism other than blockade of IL-2/IL-2R $\alpha$  interaction.

L11 ANSWER 2 OF 135 EMBASE COPYRIGHT (c) 2006 Elsevier B.V. All rights reserved on STN  
TI HSP70 from Trypanosoma cruzi is endowed with specific cell proliferation potential leading to apoptosis.

L11 ANSWER 3 OF 135 EMBASE COPYRIGHT (c) 2006 Elsevier B.V. All rights reserved on STN  
TI TNF regulates thymocyte production by apoptosis and proliferation of the triple negative (CD3-CD4-CD8-) subset.

L11 ANSWER 4 OF 135 EMBASE COPYRIGHT (c) 2006 Elsevier B.V. All rights reserved on STN  
TI Advances in interleukin 2 receptor targeted treatment.

L11 ANSWER 5 OF 135 EMBASE COPYRIGHT (c) 2006 Elsevier B.V. All rights reserved on STN  
TI Clinopathological studies of a patients with adult T-cell leukemia and pseudogynecomastia.

L11 ANSWER 6 OF 135 EMBASE COPYRIGHT (c) 2006 Elsevier B.V. All rights reserved on STN  
TI Transfected human dendritic cells to induce antitumor immunity.

L11 ANSWER 7 OF 135 EMBASE COPYRIGHT (c) 2006 Elsevier B.V. All rights reserved on STN  
TI Spontaneous B-cell IgE production in a patient with remarkable eosinophilia and hyper IgE.

L11 ANSWER 8 OF 135 EMBASE COPYRIGHT (c) 2006 Elsevier B.V. All rights reserved on STN  
TI Functional characterization of an IL-7-dependent CD4+CD8 $\alpha\alpha$ + Th3-type malignant cell line derived from a patient with a cutaneous T-cell lymphoma.

L11 ANSWER 9 OF 135 EMBASE COPYRIGHT (c) 2006 Elsevier B.V. All rights reserved on STN  
TI Restoration of functional defects in peripheral blood mononuclear cells isolated from cancer patients by thiol antioxidants Alpha-Lipoic Acid and N- Acetyl Cysteine.

L11 ANSWER 10 OF 135 EMBASE COPYRIGHT (c) 2006 Elsevier B.V. All rights reserved on STN  
TI Phase I trial of recombinant immunotoxin anti-Tac(Fv)-PE38 (LMB-2) in

patients with hematologic malignancies.

- L11 ANSWER 11 OF 135 EMBASE COPYRIGHT (c) 2006 Elsevier B.V. All rights reserved on STN  
TI Activation of lymphocytes by anti-CD3 single-chain antibody dimers expresses' on the plasma membrane of tumor cells.
- L11 ANSWER 12 OF 135 EMBASE COPYRIGHT (c) 2006 Elsevier B.V. All rights reserved on STN  
TI Hairy cell leukemia, a B-cell neoplasm that is particularly sensitive to the cytotoxic effect of anti-Tac(Fv)-PE38 (LMB-2).
- L11 ANSWER 13 OF 135 EMBASE COPYRIGHT (c) 2006 Elsevier B.V. All rights reserved on STN  
TI Role of autologous CD4+ T cell clones in human B non-Hodgkin's lymphoma: Aborted activation and G1 blockade induced by cell-cell contact..
- L11 ANSWER 14 OF 135 EMBASE COPYRIGHT (c) 2006 Elsevier B.V. All rights reserved on STN  
TI Increased activation of lymphocytes infiltrating primary colorectal cancers following immunisation with the anti-idiotypic monoclonal antibody 105AD7.
- L11 ANSWER 15 OF 135 EMBASE COPYRIGHT (c) 2006 Elsevier B.V. All rights reserved on STN  
TI Biological features of human T-activated killer cells.
- L11 ANSWER 16 OF 135 EMBASE COPYRIGHT (c) 2006 Elsevier B.V. All rights reserved on STN  
TI What we have learned from trials of immunomodulatory agents in rheumatoid arthritis: Future directions.
- L11 ANSWER 17 OF 135 EMBASE COPYRIGHT (c) 2006 Elsevier B.V. All rights reserved on STN  
TI Tumor rejection by in vivo administration of anti-CD25 (interleukin-2 receptor  $\alpha$ ) monoclonal antibody.
- L11 ANSWER 18 OF 135 EMBASE COPYRIGHT (c) 2006 Elsevier B.V. All rights reserved on STN  
TI Expression of a variant of CD28 on a subpopulation of human NK cells: Implications for B7-mediated stimulation of NK cells.
- L11 ANSWER 19 OF 135 EMBASE COPYRIGHT (c) 2006 Elsevier B.V. All rights reserved on STN  
TI Increased generation of autologous tumor-reactive lymphocytes by anti- CD3 monoclonal antibody and prothymosin  $\alpha$ .
- L11 ANSWER 20 OF 135 EMBASE COPYRIGHT (c) 2006 Elsevier B.V. All rights reserved on STN  
TI Characterisation of tumour infiltrating lymphocytes and correlations with immunological surface molecules in colorectal cancer.

=> d 111 1 17 ti abs bib

- L11 ANSWER 1 OF 135 EMBASE COPYRIGHT (c) 2006 Elsevier B.V. All rights reserved on STN  
TI IL-2Ra-directed monoclonal antibodies provide effective therapy in a murine model of adult T-cell leukemia by a mechanism other than blockade of IL-2/IL-2Ra interaction.  
AB Adult T-cell leukemia (ATL) develops in a small proportion of human T-cell lymphotropic virus-I infected individuals. The leukemia consists of an overabundance of activated T cells, which are characterized by the expression of CD25, or IL-2Ra, on their cell surface.

Presently, there is not an accepted curative therapy for ATL. We developed an in vivo model of ATL in non-obese diabetic/severe combined immunodeficient (NOD/ SCID) mice by introducing cells from an ATL patient (MET-1) into the mice. The leukemic cells proliferated in these mice that lack functional T, B, and natural killer (NK) cells. The MET-1 leukemic cells could be monitored by measurements of both serum soluble Tac (IL-2Ra) and soluble human $\beta$ (2)-microglobulin ( $\beta$ (2) $\mu$ ) by ELISA. The disease progressed to death in the mice after 4-6 weeks. The mice developed grossly enlarged spleens and a leukemia involving ATL cells that retained the phenotype and the T-cell receptor rearrangement and human T-cell lymphotropic virus-I integration pattern of the patient's ATL leukemia cells. This model is of value for testing the efficacy of novel therapeutic agents for ATL. The administration of humanized anti-Tac (HAT), murine anti-Tac (MAT), and 7G7/B6, all of which target IL-2Ra, significantly delayed the progression of the leukemia and prolonged the survival of the tumor-bearing mice. In particular, HAT induced complete remissions in 4 of 19 mice and partial remissions in the remainder. It appears that the antibodies act by a mechanism that had not been anticipated. The prevailing view is that antibodies to the IL-2Ra receptor have their effective action by blocking the interaction of IL-2 with its growth factor receptor, thereby inducing cytokine deprivation apoptosis. However, although both HAT and MAT block binding of IL-2 to IL-2Ra of the high affinity receptor, the 7G7/B6 monoclonal antibody binds to a different epitope on the IL-2Ra receptor, one that is not involved in IL-2 binding. This suggested that the antibodies provide an effective therapy by a mechanism other than induction of cytokine deprivation. In accord with this view, the MET-1 cells obtained from the spleens of leukemic mice did not produce IL-2, nor did they express IL-2 mRNA as assessed by reverse transcription-PCR. Another possible conventional mechanism of action involves complement-mediated killing. However, although MAT and 7G7/B6 fix rabbit complement, HAT does not do so. Furthermore, in the presence of NOD/SCID mouse serum, there was no complement-mediated lysis of MET-1 cells. In addition, the antibodies did not manifest antibody-dependent cellular cytotoxicity with NOD/SCID splenocytes that virtually lack NK cells as the effector cells as assessed in an in vitro chromium-release assay. However, in contrast to the efficacy of intact HAT, the F(ab') $(2)$  version of this antibody was not effective in prolonging the survival of mice injected with MET-1 ATL cells. In conclusion, in our murine model of ATL, monoclonal antibodies, HAT, MAT, and 7G7/B6, appear to delay progression of the leukemia by a mechanism of action that is different from the accepted mechanism of IL-2 deprivation leading to cell death. We consider two alternatives: The first, antibody-dependent cellular cytotoxicity mediated by FcRI- or FcRIII-expressing cells other than NK cells, such as monocytes or polymorphonuclear leukocytes. The second alternative we consider involves direct induction of apoptosis by the anti-IL-2R antibodies in vivo. It has been shown that the IL-2R is a critical element in the peripheral self-tolerance T-cell suicide mechanism involved in the phenomenon of activation-induced cell death.

AN 2001028777 EMBASE  
TI IL-2Ra-directed monoclonal antibodies provide effective therapy in a murine model of adult T-cell leukemia by a mechanism other than blockade of IL-2/IL-2Ra interaction.  
AU Phillips K.E.; Herring B.; Wilson L.A.; Rickford M.S.; Zhang M.; Goldman C.K.; Yun Tso J.; Waldmann T.A.  
CS T.A. Waldmann, Metabolism Branch, National Cancer Institute, NIH, Building 10, 10 Center Drive, MSC 1374, Bethesda, MD 20892-1374, United States  
SO Cancer Research, (15 Dec 2000) Vol. 60, No. 24, pp. 6977-6984.  
Refs: 39  
ISSN: 0008-5472 CODEN: CNREAS  
CY United States  
DT Journal; Article  
FS 016 Cancer

025      Hematology  
030      Pharmacology  
037      Drug Literature Index  
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SL      English  
ED      Entered STN: 1 Feb 2001  
Last Updated on STN: 1 Feb 2001

L11 ANSWER 17 OF 135 EMBASE COPYRIGHT (c) 2006 Elsevier B.V. All rights reserved on STN  
TI Tumor rejection by in vivo administration of anti-CD25 (interleukin-2 receptor  $\alpha$ ) monoclonal antibody.  
AB Immune regulation has been shown to be involved in the progressive growth of some murine tumors. In this study, we demonstrated that a single in vivo administration of an amount less than 0.125 mg of anti-CD25 interleukin 2 receptor  $\alpha$  monoclonal antibody (mAb; PC61) caused the regression of tumors that grew progressively in syngeneic mice. The tumors used were five leukemias, a myeloma, and two sarcomas derived from four different inbred mouse strains. Anti-CD25 mAb (PC61) showed an effect in six of the eight tumors. Administration of anti-CD25 mAb (PC61) caused a reduction in the number of CD4+CD25+ cells in the peripheral lymphoid tissues. The findings suggested that CD4+CD25+ immunoregulatory cells were involved in the growth of those tumors. Kinetic analysis showed that the administration of anti- CD25 mAb (PC61) later than day 2 after tumor inoculation caused no tumor regression, irrespective of depletion of CD4+CD25+ immunoregulatory cells. Two leukemias, on which the PC61-treatment had no effect, seemed to be incapable of eliciting effective rejection responses in the recipient mice because of low or no antigenicity.

AN 1999237107 EMBASE  
TI Tumor rejection by in vivo administration of anti-CD25 (interleukin-2 receptor  $\alpha$ ) monoclonal antibody.  
AU Onizuka S.; Tawara I.; Shimizu J.; Sakaguchi S.; Fujita T.; Nakayama E.  
CS E. Nakayama, Dept. of Parasitology and Immunology, Okayama University Medical School, 2-5-1 Shikata-cho, Okayama 700-8558, Japan  
SO Cancer Research, (1 Jul 1999) Vol. 59, No. 13, pp. 3128-3133.  
Refs: 31  
ISSN: 0008-5472 CODEN: CNREA8  
CY United States  
DT Journal; Article  
FS 016      Cancer  
026      Immunology, Serology and Transplantation  
037      Drug Literature Index  
LA      English  
SL      English  
ED      Entered STN: 27 Jul 1999  
Last Updated on STN: 27 Jul 1999